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BURGH OF GREENOCK



Annual Report

on the

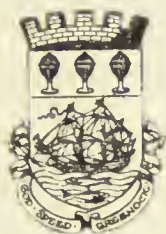
Health of the Burgh

FOR THE YEAR 1935

BY
ALEXANDER JOHNSTONE, M.C., M.A., M.D., CL.B., D.P.H.
Medical Officer of Health

GREENOCK.
PRINTED BY J. STOREY & SONS, 14 HIGH STREET
1936.

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LIST OF STAFF.

Medical Officer of Health.

Alexander Johnstone, M.C., M.A., M.D., Ch.B., D.P.H.

Assistant Medical Officers of Health.

Helena M. Shanks, M.B., Ch.B., D.P.H.

Archd. J. Campbell, M.B., Ch.B., D.P.H. (Took up duty, 3/6/35)

Health Visitors.

Joan M. Pollok.

Mrs Jessie Macfarlane.

Mary Duncan.

Mrs Jessie Gillespie.

Jean Wood.

Annie Lonie (Took up duty,
21/10/35).

In addition all the nurses of the Greenock and District Nursing Association act as part-time Health Visitors under the Maternity and Child Welfare or Tuberculosis Schemes.

Public Health Staff.

John McCrone, Epidemic Officer.

Minnie Sinclair.

Margaret C. MacElwee.

Helen C. Bog.

Ella S. Sloan.

Elsie C. Greenham.

Elizabeth McKellar.

Maternity Hospital.

Ethel C. Thomson, Matron.

Marion Currie (Resigned 3/6/35).

Margaret Knox (Resigned 9/5/35).

Elizabeth Gribben (Took up duty 9/6/35).

Florence M. Kendrick (Took up duty, 16/8/35).

Venereal Diseases Special Treatment Centre.

John Carson, Orderly.

Disinfecting Station.

Patrick O'Kane, Station Disinfecting Officer.

Daniel McLean, District Disinfecting Officer (Retired 15/3/35).

Archd. Comrie, District Disinfecting Officer (Took up duty
16/3/35).

Reception House.

Barbara Byle, Matron (Retired 15/5/35).

Mary Gilmour, Matron (Took up duty 16/5/35).

Part-time Officers.

John Miller, M.B., Ch.B.,

William A. Milne, M.B., Ch.B.,

{ Surgeon Accoucheurs.

Randolph Douglas, L.D.S., D.D.S., L.R.C.P., Dental Surgeon.

TABLE OF CONTENTS.

	Page.
Bacteriological Examinations,	60
Births and Birth-rate,	7
Causes of Death,	8
Cerebro-spinal Meningitis,	14
Chickenpox,	13
Co-operation by the Public,	44
Deaths and Death-rate,	8
Diphtheria,	13
Disinfection,	63
Drainage,	77
Enteric Fever,	13
Factories and Workshops,	76
Handling of Foodstuffs,	68
Hospital Accommodation and Ambulance Arrangements,	47
Housing and Town Planning,	69
Infantile Mortality,	7
Infectious Disease,	11
Maternity Service and Child Welfare Scheme,	26
Measles,	12
Meat Inspection,	67
Medical Care and Nursing of the Sick Poor,	49
Meteorology,	78
Midwives (Scotland) Act,	39
Milk and Dairies,	64
Nuisances,	77
Pneumonia,	14
Population,	7
Port Sanitary Administration,	62
Propaganda,	78

Puerperal Fever and Puerperal Pyrexia,	14
Reception House,	64
Rivers Pollution,	77
Scarlet Fever,	12
Sera, Vaccines and Insulin,	61
Smallpox,	14
Statistical Comparison of Districts,	11
Statistical Summary,	6
Suspected Food Poisoning,	16
Tuberculosis Scheme,	16
Venereal Diseases Scheme,	41
Vital Statistics,	7
Water Supply,	77
Whooping Cough,	12

APPENDIX TABLES.

(I). Vital Statistics,	79
(II). Causes of Death—Registrar General,	80
(III). Causes of Death—Public Health Districts,	81
(IV). Population and Principal Rates per 1,000, 1881-1935,	82
(V). Sources of Notifications of Infectious Diseases,	83
(VI). Monthly Incidence of Infectious Diseases,	84
(VII). District Incidence of Infectious Diseases with removals to Hospital,	85
(VIII). Infectious Diseases Rates, 1900-1935,	86

To the Department of Health for Scotland,
and the Local Authority of the Burgh of Greenock.

LADIES and GENTLEMEN,

I beg to submit the Annual Report on the Health and Sanitary condition of the Burgh for the year 1935.

The measles epidemic which continued from last year finally subsided in May. The disease remained mild in character.

Whooping Cough was epidemic during the first six months of the year and was of fairly severe type.

The general death-rate 13.9 is considerably higher than that of last year, but is equal to the average for the past five years.

The maternal mortality rate 7.72 is unusually high and the infantile mortality rate 92 is only slightly below the average of the last five years.

The tuberculosis death-rate 0.85 on the other hand is markedly below any rate previously recorded.

The appointment of Dr. Archibald J. Campbell as Assistant Medical Officer during the year has been of great benefit and has materially added to the efficiency of the Department.

It is with regret that I have to record the retiral through the operation of the Superannuation Scheme of Mr Daniel McLean, Disinfecting Officer, and Miss Barbara Byle, Matron of the Reception House. Mr McLean was an officer of the Department for 43 years, and Miss Byle for 11 years. During these periods they both gave faithful and ungrudging service.

I have again to express my thanks to the staff of my department for their ever ready help and constant loyalty, and to my colleagues in the Corporation for their courtesy and co-operation during the year.

I am,

Ladies and Gentlemen,

Your obedient Servant,

ALEXANDER JOHNSTONE,

Medical Officer of Health.

STATISTICAL SUMMARY.

1935.

Population as estimated at the middle of 1935, ..	79,980
Acreage of Burgh,	3.170
Density of population per acre,	25.23
Birth-rate,	21.2
Illegitimate birth-rate per 100 births,	5.2
Marriage-rate (uncorrected),	7.3
Death-rate—all causes,	13.9
Death-rate—all tuberculosis,	0.85
Death-rate—tuberculosis of respiratory system,	0.76
Death-rate—non-pulmonary tuberculosis,	0.09
Death-rate—principal epidemic diseases,	0.79
Infantile mortality rate,	92

All rates given are corrected for transfers except where otherwise indicated.

PUBLIC HEALTH DISTRICTS.

A—EAST DISTRICT—corresponds to municipal wards Nos. I., II., and III.

B—EAST CENTRAL DISTRICT—corresponds to municipal wards Nos. IV. and V.

C—WEST CENTRAL DISTRICT—corresponds to municipal wards Nos. VI. and VII.

D—WEST DISTRICT—corresponds to municipal ward No. VIII.

Medical Officer's Report

For the Year 1935.

VITAL STATISTICS.

POPULATION.—The Registrar General's estimate of the population of the burgh to the middle of 1935 is 79,980, and this figure has been used as the basis of all statistical calculations except where otherwise indicated.

This estimated population shows an increase of 375 over last year's figure.

The natural increase of population was 585. This is a decrease of last year's figure of 634, and below the average for the last ten years, namely 674.

BIRTHS AND BIRTH-RATE.—The number of births registered during 1935 was 1,689. This number on correction becomes 1,693 (860 males and 833 females) and the equivalent rate is 21.2. Last year's figure was 20.9, and the average for the last five years is 21.8.

The rate for the whole of Scotland is 17.8.

Tables I. to IV. give further information.

INFANTILE MORTALITY.—The number of deaths of children under one year of age was 156, a slight increase over last year's figure of 148, but below the average for the last ten years, namely 183. The corresponding infantile mortality rate is 92, which is slightly higher than last year's figure of 89, but below the average for the last ten years, namely 100.

The infantile mortality rate for the whole of Scotland was 76.8.

Atrophy, debility and marasmus was responsible for 27.56 per cent. of the total infantile deaths, premature birth for 18.58, pneumonia for 14.1, diarrhoea and enteritis for 8.33, whooping cough for 7.69, and convulsions for 7.05.



DEATHS AND DEATH-RATE.—The number of deaths registered in the burgh was 1,114. When corrected for transfers, this figure becomes 1,108 (607 males and 501 females). The corresponding death-rate is 13.9. This figure is higher than last year, when it was 12.9, but is the same as the average for the last five years. The average age at death was approximately 51 years.

The general death-rate for Scotland was 13.2.

CAUSES OF DEATH.—The following were the chief causes of death during 1935:—Heart disease, 169; malignant tumours, 136; cerebral haemorrhage, 88; pneumonia, 80; congenital debility, premature birth, malformations, etc., 79; tuberculosis (all forms), 69; bronchitis, 55; old age, 48; diseases of the nervous system and sense organs, 45; convulsions, 40.

Tables II. and III. give further information regarding causes of death, which may be conveniently grouped as follows:—

Principal Epidemic Diseases.—Whooping Cough was the cause of 26 deaths (12 of which were in children under one year of age, and 14 in children between the ages of one and five). Influenza was responsible for 23 deaths, of which 15 occurred in persons over the age of 55. Diphtheria was responsible for 6 deaths, measles for 3 (all between the ages of 1 and 5), scarlet fever for 2, and other epidemic diseases for 2.

The total number of deaths from this cause was, therefore, 63, which produces a death-rate of 0.78. These figures are higher than the corresponding figures for last year, namely 50, and 0.62, but are below the last triennial averages 95 and 1.19.

Tuberculous Diseases.—During the year the number of deaths from pulmonary tuberculosis was 61, and the corresponding death-rate 0.76, as against 63 deaths and a rate of 0.79 last year. The average rate for the last five years was 0.82. Tuberculosis of other organs caused 7 deaths as against 17 last year. The non-pulmonary rate is 0.09, which is very markedly below last year's figure of 0.21, and still further below the previous quinquennial average of 0.27. This non-pulmonary death-rate shows a continuation of the recent steady improvement.

The total tuberculosis rate is, therefore, 0.85, which is below last year's figure of 1.00, and also below the average for the last five years, 1.09. This is again a record low rate for the burgh; a figure below 1.0 has never before been recorded.

The rate for all Scotland is 0.74, pulmonary 0.57, non-pulmonary 0.17.

Malignant Disease.—Cancer in its various forms was responsible for 136 deaths (69 males and 67 females), and the death-rate was 1.7. Last year the number of deaths was 121 and the rate 1.5. The average number of deaths for the last ten years is 109 (49 males and 60 females) and the death-rate 1.35 (males 0.61, females 0.74).

These figures show a resumption of the steady increase of this rate, which was interrupted last year.

Diseases of the Circulatory System.—The number of deaths from diseases of the circulatory system was 196, of which 169 were from diseases of the heart, and 27 from other causes. The heart disease death-rate is 2.11, which is higher than the corresponding figure for last year, namely, 1.96, and the last 5 yearly average 1.63.

Diseases of the Respiratory System.—These diseases produced 145 deaths during the year, which figure gives an equivalent death-rate of 1.81. These figures are above those of 1934, which were 131 deaths and a rate of 1.64. The average number for the last 10 years was 192 and the rate 2.39.

Pneumonia was responsible for 80 of the total respiratory deaths and the death-rate from this cause is 1.00. Last year the number was 76 and the death-rate 0.95, the average rate for the last five years being 1.20. Of these deaths 22 occurred in children under 1 year, 12 in children aged 1-5 years, and 9 in persons over the age of 65.

Bronchitis accounted for 55 deaths, and of these 4 were in children under the age of 5, while 28 were in persons over 65 years of age. The death-rate was 0.68, as against 0.50 last year, and the previous quinquennial average 0.80.

Diseases of the Nervous System and Sense Organs.—The deaths classified under this group number 134, of which 88 were due to cerebral haemorrhage, embolism or thrombosis. The death-rate from this cause is 1.67 as against 1.14 last year, and the last 5 yearly average 1.30.

Diseases of the Digestive System.—Deaths referable to the digestive system numbered 71, of which 26 were due to diarrhoea and enteritis, and of these 19 were in children under 2 years of age. Eleven were caused by gastric or duodenal ulcer, 8 by diseases of the liver, 4 by appendicitis, and 22 by other digestive diseases.

The number of deaths from diarrhoea and enteritis in children under 2 years of age was 16 in 1934, and the last quinquennial mean is 20.

Diseases of the Genito-Urinary System.—The deaths from diseases of this system totalled 36, of which 17 were due to nephritis and 19 to other conditions.

Diseases of Pregnancy and Childbirth.—The Registrar General shows 11 deaths from this cause, 3 being due to puerperal sepsis and 8 to other puerperal causes.

The following Table gives the Registrar General's puerperal death figures for the period 1900-1935 along with figures calculated in this department, which, being the result of considerable detailed investigation, probably give a more true indication of the maternal death-rate:—

Period.	Death-rate from Puerperal Sepsis, Registrar General.	Death-rate from Other Puerperal Causes, Registrar General.	Total Puerperal Death-rate, Registrar General.	Maternal Death-rate Public Health Department.
1900-1904,	2.46	2.84	5.31	—
1905-1909,	1.59	3.53	5.15	—
1910-1914,	1.26	5.37	6.63	—
1915-1919,	0.88	4.95	5.83	—
1920-1924,	1.58	4.71	6.29	—
1925-1929,	1.80	4.16	5.96	—
1930,	—	4.76	4.76	5.82
1931,	1.62	6.49	8.11	8.11
1932,	1.76	5.28	7.04	5.87
1933,	3.05	4.27	7.32	6.71
1934,	0.60	4.21	4.81	4.21
1930-1934,	1.40	5.00	6.40	6.14
1935,	1.77	4.72	6.49	7.72

The maternal death-rate for Scotland was 6.3.

Investigation in this department shows that there were in all 18 maternal deaths during the year as against 9 last year.

The causes of death may be classified as follows:—

(I) Conditions connected with pregnancy and parturition, 13.

Toxaemia,	-	-	-	-	-	5
Post-abortion Sepsis,	-	-	-	-	-	3
Septicaemia,	-	-	-	-	-	2
Eclampsia and Heart Disease,	-	-	-	-	-	1
Post-partum Haemorrhage,	-	-	-	-	-	1
Puerperal Shock,	-	-	-	-	-	1

(II) Conditions associated with, but not directly connected with pregnancy or parturition, 5.

Heart Disease,	-	-	-	-	-	2
Lobar Pneumonia,	-	-	-	-	-	1
Intestinal Obstruction,	-	-	-	-	-	1
Epilepsy,	-	-	-	-	-	1

Nine of these cases received adequate ante-natal supervision, 4 having attended the Corporation ante-natal clinic regularly, and 5 were under the care of a private practitioner. Seven cases had some, but apparently inadequate, ante-natal supervision, and in 2 cases there was no supervision at all.

Diseases of Early Infancy and Congenital Malformations.—Deaths from these causes numbered 79, and may be classified as follows:—Atrophy, debility and marasmus, 45; premature birth, 28; hydrocephalus, 2; congenital malformation, 2; congenital heart disease, 1; atelectasis, 1. Last year the number was 82, and the average for the last five years is 78. Further information regarding diseases of children under 1 year of age will be found in the maternity and child welfare section of the report.

Violent Deaths.—These numbered 44, of which 4 were apparently suicides (3 males and 1 female), and 40 accidental (31 males and 9 females). The corresponding figure for last year was 6 suicides (5 males and 1 female), and 25 violent deaths (20 males and 5 females), while the average for the last 10 years was 5 deaths from suicide and 34 from other violence.

STATISTICAL COMPARISON.—The following table gives a comparison of the various rates in the Public Health Districts, and the average age at death as estimated in this Department:—

	A.	B.	C.	D.
	East.	East Central.	West Central.	West.
Population,	27,296	13,870	24,943	13,871
Density per acre.	24.37	101.98	40.29	10.71
Birth-rate.	29.93	18.02	21.32	11.31
Infantile Mortality-rate,	82.00	80.00	114.66	50.95
General death-rate.	14.32	12.40	12.86	16.14
Tuberculosis death-rate.	1.09	1.08	0.76	0.28
Average age at death.	47.52	50.82	50.22	58.88

INFECTIOUS DISEASE.

The total number of cases of infectious disease ascertained during the year 1935 was 3,145, which is below last year's figure of 3,186 and also below the mean of the previous quinquennium

3,357. The incidence rate of infectious disease in the community as a whole during the year was 39.32 per 1,000 of the population.

Further information regarding infectious disease will be found in Tables V to VIII.

MEASLES.—There were 1,073 cases of this disease notified during the year, 761 of which occurred in children under the age of 5. There were 3 deaths, all of which occurred in children under 5. The incidence rate over the age period 0-5 is, therefore, 94.13, the death-rate 0.37, and the case mortality rate 0.39

Last year 1,696 cases were notified, and the average for the last 5 years is 1,441. Fourteen cases had also whooping cough, and 1 diphtheria. Eleven cases were removed to hospital. The months of highest incidence were January, February, March and April.

The special arrangements previously made for the visitation of cases of measles in children under five were continued and found to be of great value. Milk was provided where it appeared to be necessary.

WHOOPING COUGH.—One thousand and seventy cases were notified, with the highest incidence in March. Last year's figure was 131, and the last quinquennial mean 416. Fourteen cases also had measles, 4 chickenpox and 1 scarlet fever.

The number of cases in children under 5 years of age was 626, and there were 26 deaths during that period of life. The incidence rate of the age period 0-5 is, therefore, 77.43, the death-rate 3.21 and the case mortality rate 4.15 per cent.

Special arrangements for the visitation of cases of whooping cough were made as in the case of measles, with favourable results.

During the year whooping cough vaccine was made available to medical practitioners for the treatment of necessitous children of any age free of charge.

SCARLET FEVER.—Ninety-four cases were notified, with the highest incidence in January. Last year's figure was 430, and the average for the last 5 years 597. There were 2 deaths. One case had also whooping cough. The incidence rate over the whole population is 1.17 and the case mortality rate 2.12 per cent.

DIPHTHERIA.—There were 122 cases of diphtheria discovered during the year. The number last year was 184, and the last 5 yearly average is 135. The incidence rate over the whole population is 1.52, and as the deaths numbered 6, the death-rate is 0.07, and the case mortality rate 4.91 per cent. One case also had measles.

Contacts.—Swabbing of the throats of contacts of diphtheria cases was carried out in 183 instances where it appeared to be necessary, and 9 such persons gave a positive result. All of them were admitted to hospital and 5 developed symptoms of the disease.

Immunisation.—Towards the end of the year a further effort was made to carry out immunisation of children against diphtheria and in this case approach was made to the parents through the schools. The work was only begun in December, with the following result:—

Total Number of 1st Injections.	Total Number of 2nd Injections.	Total Number of 3rd Injections.	Total Number of Injections.
32	25	15	72

It is proposed meantime to immunise all children without preliminary testing using the method of three injections given at weekly intervals and followed after a period of about two months by a Schick test.

Arrangements are still in force whereby doctors may receive the material for necessitous cases free of charge. It has been arranged, however, for the Schick test after immunisation to be carried out in this department.

CHICKENPOX.—Six hundred and twenty-four cases were notified during the year, mostly during June, November, September and October. There were no deaths. The number last year was 597 and the last five yearly average 560. Four cases had also whooping cough.

ENTERIC FEVER.—Seven cases of this group were notified as against 1 last year, and a previous quinquennial average of 9. Three cases were found to be of typhoid type, 2 paratyphoid B type, and 1 of combined typhoid and paratyphoid B types, while in 1 the diagnosis was later altered to diarrhoea and enteritis.

All cases were removed to hospital, where one of the typhoid cases died and also the case of diarrhoea and enteritis.

One of the patients had been on a pilgrimage to Lourdes and had undoubtedly contracted the infection in France. The others were of sporadic type and no definite source of infection was discovered.

PNEUMONIA.—One hundred and three cases were discovered, 53 being of acute primary type, 2 influenzal, and 48 presumably secondary to some other condition. The highest incidence occurred in the months of March, April, May and December. Last year's figure was 93, and the average for the last 5 years is 103. Five cases only were removed to hospital, and the number of deaths was 80.

CEREBRO-SPINAL MENINGITIS.—There was only one case of this disease during the year.

SMALLPOX.—There were no cases of this disease during 1935.

Vaccination.—The number of births registered in the east and west registration districts of the burgh during 1934 was 1616. By the end of the year under review 293 of these children had been successfully vaccinated, 18 were found to be constitutionally insusceptible, 106 had died before vaccination had been carried out, in 5 a medical certificate of postponement had been issued, and 18 left the district or were otherwise unaccounted for, while declarations of conscientious objection had been made in respect of 1176. Seventy-two per cent of the children available for vaccination were, therefore, not vaccinated.

One hundred and twenty-two vaccinations were carried out on 98 children under the maternity and child welfare scheme at the Corporation clinics. In 74 cases vaccination was successful on the first occasion, and 24 on the second.

PUERPERAL FEVER AND PUERPERAL PYREXIA:—

(I.)—Total number of cases occurring in the area of the Local Authority (corrected figures as finally diagnosed).

(a)	Puerperal Fever (Maternity Hospital, 0),	-	-	1
(b)	Puerperal Pyrexia (Maternity Hospital, 2),	-	-	12

(II.)—Total number of cases removed to infectious diseases Hospital:—

(a) Puerperal Fever (Maternity Hospital, 0)	-	-	1
(b) Puerperal Pyrexia (Maternity Hospital, 2)	-	-	6

(III.)—Total number of deaths:—

(a) Puerperal Fever (Maternity Hospital, 0)	-	-	0
(b) Puerperal Pyrexia (Maternity Hospital, 0)	-	-	2

(IV.)—Number of cases following instrumental delivery:—

(a) Puerperal Fever,	-	-	-	-	-	0
(b) Puerperal Pyrexia (Maternity Hospital, 1)	-	-	-	-	-	3

(V.)—Number of deaths occurring in cases included under IV:—

(a) Puerperal Fever,	-	-	-	-	-	-	0
(b) Puerperal Pyrexia,	-	-	-	-	-	-	0

(VI.)—Number of cases where the Local Authority provided on the request of medical practitioners:—

(i) Consultant Service,	-	-	-	-	-	-	0
(ii) Bacteriological Examinations,	-	-	-	-	-	-	0
(iii) Skilled nursing at home,	-	-	-	-	-	-	0
(iv) Hospital treatment,	-	-	-	-	-	-	5

Puerperal Fever,	-	-	-	-	-	-	1
Puerperal Pyrexia,	-	-	-	-	-	-	4

(VII.)—Observations on the working of the Regulations. Nil.

Investigation.—One case of puerperal fever was notified following abortion. The patient was aged 38 years, and this was the third pregnancy. Haemorrhage occurred during the third month, and patient was removed to hospital, where sepsis followed surgical procedures for removal of retained material.

The information elicited by the investigation of cases of puerperal pyrexia may be summarised as follows:—

(I.)—Age of Patient.—Under 20, 2; 20-24, 3; 25-29, 1; 30-34, 3; 35-39, 3.

(II.)—Number of Confinement.—First, 5; second, 5; third, 1; fifth, 1.

(III.)—Nature of Attendance.—Midwife, 6; Midwife and Doctor, 4; Midwife, Doctor and Institution, 2.

(IV.)—Nature of Confinement.—Forceps, 3 cases; Caesarean Section, 1 case; Normal Confinements, 8.

(V.)—Possible exciting causes:—

Conditions not attributable to parturition,	-	-	1
Septic conditions,	-	-	3
Gynaecological conditions,	-	-	2
Nothing found on investigation,	-	-	6

SUSPECTED FOOD POISONING.

During the year only one case of suspected food poisoning was brought to the notice of the department. Two persons had consumed salmon from a tin and several hours later suffered from severe vomiting and diarrhoea. Both, however, had recovered before intimation was made. It was found that a cat which had eaten the remains of the salmon had died during the following night. Unfortunately no material of any kind was available for examination, but the stock of salmon from the shop of the supplier was taken charge of and other tins subjected to chemical analysis. Nothing, however, of an abnormal nature was discovered. The salmon was of a cheap brand, and obviously contained a certain proportion of shell fish flesh, which may have been the cause of the symptoms.

TUBERCULOSIS.

Continued progress has been made in the control, and towards the ultimate goal of the eradication, of all forms of this disease. Analysis of the figures for this and previous years shows that there is a steady though gradual diminution in both the incidence rate and the death rate. The death rate, however, shows a greater reduction than the incidence rate: this is a feature shared with most other diseases. Treatment is always in advance of preventive measures because it has had so many years' start. And although there is as yet no one specific cure for tuberculosis, the combination of methods used in the treatment of this disease in its various manifestations is steadily increasing the number of years of useful life in front of tuberculous patients.

Tuberculosis is an infectious disease, and the rational method of attack is by means of isolation of every infective case: but at present there are many factors, legislative, economic and social, which render this procedure unattainable. For purposes of prevention, therefore, it may be wise at present to concentrate on the child, for the infected child of to-day is the potential patient of to-morrow, there being a strong presumption that many cases of tuberculosis in adult life are due to infection in childhood. This would entail the examination of all contacts, especially the younger ones, of every infective case of tuberculosis, and the continued supervision of such cases. Even this is not practicable in its entirety.

This year the tuberculosis death rate has continued its downward trend¹, and has reached a lower level than has ever before been recorded in the burgh. The details of the death rate are given elsewhere.

As a striking presentation of the reduction in the tuberculosis death-rate, comparison may be made between the respective rates for the years 1911 and 1935. The former year preceded the inception of organised anti-tuberculosis measures in Scotland, and the tuberculosis death-rates of that year may be taken as a convenient standard by which to gauge progress. It is necessary, however, to remember the reduction in the general death-rate which has taken place over the same period, and to show that the fall in the tuberculosis death-rate is not merely due to the general measures aimed at the amelioration of those conditions conducive to sickness and disease, but is in some degree at least related to the special anti-tuberculosis campaign. In 1911 the general death-rate was 18.44; in 1935 it had fallen to 13.85, a reduction of 24.9 per cent. Over the same period, the total tuberculosis death-rate had fallen from 2.45 to 0.85, a reduction of 65.3 per cent. The fall in the tuberculosis death-rate has been, therefore, much more rapid during that period than that of the general death-rate, suggesting that additional factors have been at work.

To envisage this reduction in death-rate in more concrete form, it may be profitable to estimate what would have been the condition of affairs in 1935 if the tuberculosis death-rate had remained at the level of 1911. Given the 1935 population of 79,980 and the 1911 death-rate of 2.45, there would have died in Greenock in 1935 from all forms of tuberculosis 196 people. But the actual number of deaths from all forms of tuberculosis in 1935 was 68. The difference in these figures, 128, may justifiably be regarded as the saving of life last year from tuberculosis, with the 1911 rate as standard.

Analysis has also been made of the death-rate over the same period in their age sex groups, both for pulmonary and non-pulmonary tuberculosis. This shows that all age groups, with the exception of three, share in the reduction to a greater or lesser degree, the improvement being more marked in certain groups. Thus the most striking reduction has been made in the non-pulmonary death-rate of children under 10 years of age. The following tables present the various figures:—

TUBERCULOSIS DEATH-RATES 1911-1935 IN SEX
AND AGE GROUPS.

(Pulmonary Tuberculosis—Males).

Year.	Under 1 Year.	1-4	5-9	10-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 and over	All Ages Total
1911	—	0.87	0.25	0.26	1.40	1.88	1.26	1.48	1.39	0.86	—	—	1.12
1921	—	0.66	0.69	0.50	0.95	1.53	2.07	0.93	1.90	—	—	—	1.07
1931	—	0.32	0.24	0.24	1.54	1.23	1.47	1.62	0.31	—	—	—	0.91
1932	—	0.32	0.24	—	1.11	1.58	1.04	0.92	—	—	—	—	0.71
1933	—	0.32	—	0.24	0.83	1.75	1.46	1.38	0.94	—	—	—	0.86
1934	—	—	—	—	1.39	1.57	1.87	2.07	0.94	—	—	—	1.01
1935	—	—	—	0.24	1.38	1.39	1.65	0.91	0.62	—	—	—	0.83

TUBERCULOSIS DEATH-RATES 1911-1935 IN SEX
AND AGE GROUPS.

(Pulmonary Tuberculosis—Females).

Year.	Under 1 Year.	1-4	5-9	10-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 and over	All Ages Total
1911	—	0.84	0.25	0.80	3.41	3.24	2.80	0.62	0.95	0.66	2.42	—	1.57
1921	—	0.28	—	0.99	1.11	1.47	1.76	1.01	0.84	—	—	—	0.95
1931	—	0.31	—	—	1.43	1.52	1.78	0.69	0.65	0.58	—	—	0.88
1932	1.12	—	—	0.50	0.70	1.17	0.78	0.69	0.99	—	—	—	0.62
1933	1.12	0.50	0.62	0.24	1.56	2.18	0.78	—	0.65	—	—	—	0.89
1934	—	—	—	—	1.56	1.00	0.19	0.92	0.32	—	—	—	0.57
1935	—	—	—	1.00	1.27	0.66	1.37	0.45	0.64	—	—	—	0.69

TUBERCULOSIS DEATH-RATES 1911-1935 IN SEX AND AGE GROUPS.

(Non-Pulmonary Tuberculosis—Males).

Year.	Under 1 Year.	1-4	5-9	10-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 and over	All Ages Total
1911	9.49	5.24	1.50	0.80	0.42	0.47	—	—	—	—	—	—	1.14
1921	1.83	1.92	0.23	0.75	0.11	0.30	0.18	—	0.38	—	—	—	0.43
1931	3.42	0.65	0.74	—	0.28	—	—	—	—	—	—	—	0.20
1932	3.40	1.30	0.72	0.24	0.41	0.70	—	—	—	—	—	—	0.45
1933	—	0.97	—	0.24	0.27	0.17	0.20	0.23	—	—	—	—	0.22
1934	—	0.32	0.72	—	0.27	—	0.40	—	—	—	—	—	0.20
1935	1.12	0.64	0.24	—	—	—	0.20	—	—	—	—	—	0.12

TUBERCULOSIS DEATH-RATES 1911-1935 IN SEX AND AGE GROUPS.

(Non-Pulmonary Tuberculosis—Females).

Year.	Under 1 Year.	1-4	5-9	10-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 and over	All Ages Total
1911	5.06	1.69	2.07	0.80	0.74	0.16	—	—	—	—	—	—	0.75
1921	0.95	3.41	1.43	0.24	0.13	0.16	—	0.25	0.42	—	—	—	0.60
1931	2.27	1.26	0.23	1.01	0.14	—	0.19	—	—	0.58	—	—	0.40
1932	3.38	—	0.73	0.25	—	0.16	0.19	0.23	0.32	—	—	—	0.27
1933	—	—	—	—	0.42	—	—	0.23	—	—	1.65	—	0.12
1934	—	—	0.72	0.75	0.28	0.16	—	—	—	—	—	—	0.22
1935	—	—	—	0.25	0.14	—	—	—	—	—	—	—	0.04

PULMONARY TUBERCULOSIS:—

The number of cases on the register at the end of 1934 was 307. During the year 94 new cases were notified, 13 left the district, 67 died, 13 were struck off as non-tuberculous and 34 as not requiring further supervision, 2 were re-admitted to the register, and there, therefore, remained on the roll at 31st December, 276 patients (males 166 and females 110).

Particulars of age periods, etc., are as follows:—

		Under 5 years	5-10	10-15	15-25	25-35	35-45	45-65	65 up.	Total
Sputum not present.	Males, -	1	1	—	9	2	2	—	—	15
	Females.	—	—	2	13	6	2	—	—	23
Sputum present but not examined.	Males, -	—	—	—	—	1	1	1	—	3
	Females	—	—	—	1	—	1	3	—	5
Sputum examined and Tubercle Bacilli found.	Males, -	—	—	—	17	32	13	16	—	88
	Females,	—	—	2	21	15	12	2	—	52
Sputum examined and Tubercle Bacilli never found.	Males, -	—	—	—	15	11	15	16	3	60
	Females,	—	—	1	10	6	6	7	—	30
Total,		1	1	5	86	73	62	45	3	276

In addition 116 patients were under supervision as suspects, and 62 as contacts of known cases.

NOTIFICATION.—Ninety-four cases (46 males and 48 females) were notified as suffering from pulmonary tuberculosis as against 98 last year and 102 the last five yearly average. The sputum was examined in 74 cases and in 39 cases tubercle bacilli were found to be present.

The age periods are as follows:—

AGE GROUPS.										Number of cases notified during year in which diagnosis of tuberculosis has been confirmed.	
	Under 5	5-10	10-15	15-25	25-35	35-45	45-65	65 up.	Total.	Under 15	15 up.
Males.	1	1	1	18	10	6	7	2	46	3	42
Females.	—	1	6	15	15	9	2	—	48	7	40

Twenty-eight of these patients died before the end of the year and the average period of survival was 65 days. In addition, 4 left the district and in 2 the diagnosis was not confirmed.

The following Table shows the home conditions of the notified cases in houses of different sizes, compared with the estimated percentage of such houses in the whole burgh:—

	Number of Cases.	Percentage of Total.	Percentage of Total Houses in the Burgh.
1 Apartment. - - - -	12	13	9
2 Apartments. - - - -	48	51	43
3 Apartments. - - - -	24	26	30
4 Apartments. - - - -	6	6	9
5 Apartments and over. - -	2	2	9
Institutions, Lodginghouses, etc.	2	2	—

DISPENSARY.— The number of persons who attended the dispensary was 268, and 247 X-ray examinations of the chest were carried out.

Of the total new cases examined, 54 were notified before being seen by the Tuberculosis Officer and 82 were referred for his opinion. Of these 40 were accepted as suffering from tuberculosis, 18 were not accepted, and 24 were still under observation at the end of the year.

DOMICILIARY TREATMENT.—One hundred and forty-three persons received extra nourishment during the year in the form of milk, eggs or butter.

INSTITUTIONAL TREATMENT.—The following table gives the number of cases treated in the various institutions available to the burgh:—

	Norau-side. Sanatorium.	Bridge-of-Weir Sanatorium.	Smithston Pavilion.	Gateside Hospital.	Lanfine Home	St. Andrew's Home.	County Hospital	Hairmyres Colony
Number at 1st January, 1935,	13	23	12	—	1	1	2	2
Admitted during the year,	10	23	20	46		12		
Treated during the year,	23	46	32	46	1	3	2	2
Total number discharged,	13	22	21	28		1	2	1
Died,	2	2	11	11		1		
Remaining at 31st Dec., 1935,	8	22	...	6	1	1		1

HOME SUPERVISION.—The nurses of the Greenock and District Nursing Association continued to pay supervisory visits to the patients on the tuberculosis roll. The number not attending the dispensary who were under supervision at the beginning of the year was 13, and the average number over the period was 13.

NON-PULMONARY TUBERCULOSIS:—

The number of patients on the register at the end of 1934 was 269. During the year 41 new cases were notified, 9 died, 8 were removed from the roll as non-tuberculous, and 61 as not requiring further supervision, 10 left the district, 1 was re-admitted to the register, leaving 223 (110 males and 113 females) on the roll at 31st December.

The age periods and situation of lesions are shown in the following Table:—

LESION			Under 5 years	5—10 years	10—15 years	15—25 years	25—35 years	35—45 years	45—65 years	65 upwards	Total
Abdomen. ...	Males	...	...	3	5	6	2	...	...	...	16
	Females	...	1	4	1	5	3	...	...	...	14
Spine, ...	Males	...	1	4	2	5	3	...	...	...	17
	Females	...	2	1	1	8	1	...	1	...	14
Bones and Joints, exclusive of spine.	Males	...	1	9	12	14	2	3	3	...	44
	Females	...	1	12	16	6	1	4	...	1	41
Superficial Glands, ...	Males	...	1	1	8	8	2	1	...	...	21
	Females	...	1	3	7	8	6	...	1	1	27
Lupus, ...	Males	...	...	...	1	...	1	1	1	...	4
	Females	...	...	...	1	2	3	2	2	...	10
Other Parts or Organs,	Males	...	1	1	1	3	1	1	...	...	8
	Females	...	...	1	...	3	...	...	3	...	7
Total ...			9	39	55	68	25	14	11	2	223

NOTIFICATION.—The number of cases notified was 41 as against 46 last year and 58 the average for the last five years. Five of these died before the end of the year, the average period of survival being 3 days. In one the diagnosis was not confirmed, and one was still under observation at the end of the year.

The following table shows those cases classified according to age groups and situations of lesions:—

LESION.			Under 5 years	5—10 years	10—15 years	15—25 years	25—35 years	35—45 years	45—65 years	65 upwards	Total
Abdomen ...	Males	...	...	2	1	1	...	...	...	...	4
	Females	...	1	...	1	1	...	...	...	...	3
Spine, ...	Males	...	...	2	...	...	...	...	...	...	2
	Females	...	1	...	...	...	...	...	...	...	3
Bones and Joints exclusive of Spine ...	Males	...	...	1	2	...	...	2	...	...	5
	Females	...	...	2	1	1	...	...	...	...	4
Superficial Glands	Males	...	1	...	2	...	1	1	...	...	5
	Females	...	1	...	2	...	...	...	...	...	3
Lupus ...	Males	...	...	...	...	...	...	...	...	...	...
	Females	...	...	...	...	...	1	...	...	...	1
Other Parts or Organs,	Males	...	3	...	1	...	1	1	...	...	6
	Females	...	...	...	1	2	1	...	1	...	5
Total, ...			7	7	11	7	3	6	1	...	41

The home conditions of the various notified cases were found to be as follows:—

	Number of Cases.	Percentage of Total.	Percentage of Total Houses in the Burgh.
1 Apartment, - - - -	5	12	9
2 Apartments, - - - -	22	54	43
3 Apartments, - - - -	12	30	30
4 Apartments, - - - -	1	2	9
5 Apartments and over, - -	1	2	9
Institutions, Lodginghouses, etc.	...	..	...

Tuberculous Meningitis:—

Number of cases discovered, - - -	7
Number of cases notified, - - -	5
Number of deaths, - - - - -	7

The two unnotified cases were discovered in the death returns. One aged $1\frac{1}{2}$ years had apparently been ill for three days only; the other aged 2 years developed diphtheria concurrently with the meningeal infection, and death was certified as due to the former condition.

Of the five cases notified, two were notified after death, one on the same day, and the other the following day; these cases were aged $3\frac{1}{2}$ and 12 years respectively. One case aged 19 years died the day after notification; one case aged 7 years was ill for 3 days, and the remaining case, aged 13 years, succumbed 11 days after notification. In three of the cases there was discovered a definite family history of tuberculosis; in one a brother had died from pulmonary tuberculosis; in another a brother was then in hospital suffering from tuberculosis, and in the third there was a history of a grandparent and two cousins who had died from tuberculosis.

In six cases there was a history of measles, and four of these cases had also suffered from whooping cough. In four these illnesses were comparatively remote in time, but one case had had measles and whooping cough one month prior to the onset of meningeal symptoms, and the other case had been removed to hospital suffering from debility following measles.

DISPENSARY.—The number of patients who attended the dispensary during the year was 183. Forty-four X-ray examinations were carried out.

Nineteen cases were notified before being seen by the Tuberculosis Officer, 40 were referred for his opinion, and of these 22 were accepted as suffering from tuberculosis, 7 were not accepted, while 11 were still under observation at the end of the year.

Ultra-Violet Light Therapy.—The mercury vapour lamp was in use throughout the whole of the year for the treatment of tuberculous conditions and actually burned for 500 hours. As has been before reported, the results were satisfactory, particularly in superficial conditions, and in the improvement of general health. The following conditions were treated:—

Tuberculosis of Superficial Glands, - - -	15
Tuberculosis of Skin, - - - -	7
Tuberculosis of Bones and Joints, - - -	6
Tuberculosis of Abdomen, - - - -	4
General Debility, - - - - -	5

DOMICILIARY TREATMENT.—Fifty cases received extra nourishment during the year: the details are given later.

HOME SUPERVISION.—The number of patients not attending the dispensary who were under home supervision by the visiting nurses was at 31st December, 10, the average number during the period being 11.

INSTITUTIONAL TREATMENT:—The following table gives the numbers treated in the various institutions used:—

	St. Andrew's Home, Millport.	Noranside Sanatorium.	Gateside Hospital.
Number at 1st January, 1935,	29	1	..
Admitted during the year,	18	..	5
Treated during the year	47	1	5
Discharged during the year,	17	1	4
Died,	1	...	...
Remaining at 31st Dec., 1935,	29	...	1

ALL TUBERCULOSIS:—

The number on the tuberculosis roll at the end of the year was 499. The number of persons who attended the dispensary was 578, and the total attendance amounted to 3,824 as against 3,528 last year, and 3,317 the average for the last five years.

The detail was as follows:—

Type of Case.	Number of Patients.	Primary Visits.	Re-visits
Pulmonary, .	268	67	1,582
Non-Pulmonary, .	183	31	1,932
Suspect, . .	95	74	197
Contact, . .	32	13	113
Total, .	578	185	3,824

The number of patients visited in their homes was 723 and the total supervisory visits paid amounted to 4,106. The number of persons who received extra nourishment was 193, as against 199 last year and 144 the last five yearly average. The total cost of this service was £793.

The number of prescriptions paid for by the Local Authority under the scheme was 425 and the total cost £26 16s. 11d. The number of persons who received these prescriptions was 109 and the average cost per person was 5/-.

In addition to the above, 82 patients received assistance through the Renfrewshire King Edward Memorial Fund as follows:—

Clothing,	58
Rent,	30
Dental Treatment,	9
Repair of Special Boots,	2
Provision of Special Boots,	1
Spectacles,	1
Milk,	4

MATERNITY SERVICE AND CHILD WELFARE SCHEME.

In 1935 the maternal death-rate, as estimated in this department, was unusually high, 7.72, as against the last five yearly average 6.14, while the infantile mortality rate was 92 as against 98 the last quinquennial average. These figures are not satisfactory, though they are in the main gradually yielding to the efforts being made to reduce them.

The number of expectant mothers attending the ante-natal clinic was again a record figure, 1,161, or over 62 per cent. of the total registered births,

During the year a special post-natal clinic was inaugurated for the examination and treatment of such mothers as complain of abnormal symptoms after confinement.

Arrangements were also made whereby any medical practitioner could have the services of the Maternity Hospital Surgeon-accoucheurs in a consultant capacity in any ante-natal, intra-natal or post-natal difficulty.

The provision of baby outfits to necessitous mothers at a cost of 2/- was commenced during the year, and was greatly used and appreciated.

Owing to pressure on the beds of the Maternity Hospital, arrangements were made with Greenock Royal Infirmary to accommodate in emergency any cases that could safely be transferred there after confinement.

An additional health visitor was found to be necessary on account of the increasing work in connection with ante-natal cases. Changes in the organisation for the issue of milk lines, foods and medicines, necessitated the appointing of an additional clerkess in the department. This alteration removed the need for the meetings of the milk committee, which had been carried on for 15 years by several ladies to whom the department wishes to tender grateful thanks for services so unsparingly given.

A change was made in the scheme for the provision of midwifery services whereby the fee paid to midwives for attendance at cases of abortion was increased from 7/6 to 12/6.

The Department has again to thank the Inspectors of the R.S.S.P.C.C. for their continued co-operation and help.

BIRTHS :—

Number registered (corrected).	{ Legitimate, 1605 Illegitimate, 88 }	(1,747)	1,693
Number notified, - - - - -	- - - - -	- - - - -	1,756
Number of births classified according to nature of attendance :—			
Medical Practitioner, - - - - -	- - - - -	- - - - -	232
Midwife, - - - - -	- - - - -	- - - - -	1,293
Institution, - - - - -	- - - - -	- - - - -	231
Percentage of notified births visited, - - - - -	- - - - -	- - - - -	89.97

Note—The figures in italics are the average figures for the last 5 years.

STILLBIRTHS:—

Number of stillbirths (births of dead children), (82) 83

Under this heading are included all the births of dead children after the expiry of the seventh month of pregnancy. Eighty-three cases were notified, of which 26 occurred in the Maternity Hospital where abnormal cases are treated.

Each of the stillbirths was investigated as it occurred. From the investigation the following facts were elicited:—

Classification includes 7 sets of twins, in two of which both babies were stillborn.

(1) Age of Mother.—

Under 20, 5; 20-24, 19; 25-29, 16; 30-34, 15; 35-39, 20; 40 and over, 8.

(2) Number of Pregnancy.—

First, 25; second, 9; third, 9; fourth, 5; fifth, 5; sixth, 3; seventh, 7; eighth, 5; ninth and over, 15.

(3) Duration of Pregnancy.—

7 months, 15; 8 months, 9; 9 months, 59.

(4) Nature of Attendance.—

Midwife, 50; Doctor, 6; Midwife, Doctor and Institution, 26; Doctor and Institution, 1.

(5) Presentation.—

Vertex, 60; Breech, 19; Hand, 2; Foot, 2; Face, 1; Transverse, 1.

(6) Nature of Interference.—

No interference, 51; Forceps, 16; Forceps and Version, 2; Version, 2; Manual delivery, 9; Induction, 1; Caesarean Section, 2.

(7) Condition of Child.—

Normal, 45; Macerated, 33; Abnormality, 7.

(8) Condition of Placenta.—

Healthy, 58; Unhealthy, 22; Adherent, 3.

(9) Ante-Natal health of Mother.—

Good, 58; Fair, 15; Poor, 10.

(10) Ante-natal Supervision.—

Ante-natal Clinic, 34; Doctor or Midwife, 10; Inadequate Supervision, 21; No Supervision, 18.

(11) Causal Factors.

(1) Ante-natal deaths,	-	-	-	-	-	57
Ante-partum haemorrhage,	-	-	-	-	-	11
Renal conditions,	-	-	-	-	-	10
Illness of mother,	-	-	-	-	-	8
Venereal conditions,	-	-	-	-	-	2
Gynaecological conditions,	-	-	-	-	-	2
No obvious cause,	-	-	-	-	-	24

Note—The figures in italics are the average figures for the last 5 years.

(2) Intra-natal deaths, obstetrical difficulty,	18
Delayed labour, - - - -	10
Contracted pelvis, - - - -	3
Prolapse of cord, - - - -	3
Abnormal presentation, - - - -	2
(3) Abnormality of Child, - - - -	8

ABORTIONS.—

Forty-four abortions were investigated. The causes elicited were as follows:—

Maternal strain or injury, 3; Illness of mother, 3; Cause unknown, 38.

INFANTILE MORTALITY.—

Number of deaths of children under 1 year, -	(171)	156
Rate per 1,000 births, - - - - -	(98.47)	92.14

Number of deaths and rates per 1,000 births classified according to age groups and causes of death:—

CAUSES OF DEATH.	AGE GROUPS.					Total Deaths.	Rate per 1,000 Births.
	Under 1 week	1—4 weeks.	4 weeks—3 months.	3 months—6 months.	6 months—12 months.		
Chickenpox, ...	...	...	...	...	...	...	...
Measles, ...	...	...	...	...	...	...	...
Scarlet Fever, ...	...	...	...	...	...	...	...
Whooping Cough, ...	...	...	3	2	7	12	7.09
Diphtheria and Croup, ...	...	...	...	...	...	...	...
Erysipelas, ...	...	...	...	...	...	...	...
Tuberculous Diseases, ...	...	...	...	...	...	...	...
Meningitis (non-tuberculous), ...	...	...	...	1	...	1	0.59
Hydrocephalus, ...	...	...	...	1	1	2	1.18
Convulsions, ...	4	1	1	1	4	11	6.50
Pneumonia (all forms), ...	...	...	7	6	9	22	12.99
Bronchitis, ...	...	...	1	1	3	5	2.95
Diarrhœa and Enteritis, ...	...	...	1	9	3	13	7.68
Other Digestive Diseases, ...	...	...	1	1	...	2	1.18
Congenital Malformations, ...	2	...	...	...	...	2	1.18
Congenital Heart Disease, ...	...	...	...	1	...	1	0.59
Premature Birth, ...	18	8	1	1	...	28	16.54
Atrophy, Debility, & Marasmus	12	5	14	9	5	45	26.58
Atelectasis, ...	1	...	...	...	...	1	0.59
Injury at Birth, ...	...	...	...	...	...	...	...
Suffocation, Overlying, ...	...	...	...	...	...	...	...
Syphilis, ...	...	...	...	...	...	...	...
All other Causes, ...	2	1	2	1	5	11	6.50
Total Deaths, ...	39	15	31	34	37	156	
Rate per 1000 Births, ...	23.03	8.86	18.31	20.86	21.86		92.14

This Table is compiled from the corrected number of deaths (Registrar General).

Note—The figures in italics are the average figures for the last 5 years.

MATERNAL MORTALITY:—

Number of deaths resulting from or associated with pregnancy or confinement,	(14)	18
Number of deaths resulting from puerperal sepsis (details will be found under deaths and death-rate),	(3)	5
Maternal Death-rate (Public Health Department,	(6.14)	7.72

HOME VISITATION:—

(1) Infants:—

Number of children visited,	- - - (2,529)	2,509
Number of first visits,	- - - (1,643)	1,684
Number of re-visits,	- - - (18,242)	16,414

Number of Infants at age of 6 months:—

(i) Breast fed,	- - - (684)	620
(ii) Partially breast fed,	- - - (111)	96
(iii) Artificially fed),	- - - (434)	519

Number of infants born:—

(i) Prematurely,	- - - (25)	32
(ii) At full time,	- - -	1,724

(2) Children (1-5 years):—

Number of children visited,	- - -	6,711
Number of first visits,	- - - (28)	21
Number of re-visits,	- - - (20,843)	26,319

(3) Expectant Mothers:—

Number of first visits,	- - -	386
Number of re-visits,	- - -	8

(4) Nursing Mothers:—

Number of first visits,	- - -	108
Number of re-visits,	- - -	3

(5) Visits of Special Enquiry, - - - 187

ANTE-NATAL CONSULTATIONS:—

Two sessions of two hours are held weekly at Terrace Road Clinic, and two similar sessions are held at Craigieknowes Clinic.

Total number of expectant mothers attending,	- (828)	1,161
Total number of attendances,	{ First, - - (722)	966
	{ Subsequent, - (1,836)	3,565

Classified summary of conditions found:—

Conditions directly connected with pregnancy:—

Abnormal presentation, 57; albuminuria, 104; contracted pelvis, 46; doubtful pregnancy, 26; oedema, 54; threatened abortion, 10.

Note. The figures in italics are the average figures for the last 5 years.

Anaemia and debility, 184; cardiac conditions, 28; dental conditions, 111; ear, nose and throat conditions, 12; eye conditions, 3; gastric conditions, 61; gynaecological conditions, 21; respiratory conditions, 73; nervous conditions, 10; septic conditions, 4; skin conditions, 6; venereal diseases, 4.

Consultant Ante-Natal Clinic:—

Number of expectant mothers attending, - - - 74

Classified summary of conditions found:—

Presentation doubtful, 11; pregnancy doubtful, 10; contracted pelvis, 8; gynaecological conditions, 4; haemorrhage, 1; no abnormality, 40.

POST-NATAL AND OTHER CONSULTATIONS:—

Two sessions weekly of two hours are held in Terracc Road Clinic, and two similar sessions are held in Craigicknowes Clinic.

Number of attendances, { First, - - - (457) 536
 { Subsequent, - - - (725) 728

Classified summary of conditions found:—

Dental conditions, 232; anaemia and debility, 124; respiratory conditions, 31; septic conditions, 29; digestive conditions, 21; gynaecological conditions, 16; genito-urinary conditions, 10; eye conditions, 8; rheumatism, 8; skin conditions, 8; nervous conditions, 4; cardiac disease, 3; no abnormality—advice given, 121.

Special Post-Natal Clinic:—

One session weekly is held in Terracc Road Clinic.

Number of mothers attending, - - - - - 76

Number of first visits, 76 { - - - - - 95

Number of re-visits, 19 { - - - - -

Classified summary of conditions found:—

Sutured perineum, satisfactory, 12; unsatisfactory, 6; uterine displacement, 8; post-partum debility, 8; sub-involution of uterus, 6; rectocle and cystocle, 4; no abnormality, 17; other, 15.

CHILD WELFARE CONSULTATIONS:—

Two session of two hours are held weekly in Terracc Road Clinic, and two similar sessions are held in Craigicknowes Clinic.

Total number of children attending:—

Under one year of age, { at 30th June, 1935, { (1,050) 1,289
Over one year of age, { (917) 975

Note: The figures in italics are the average figures for the last 5 years.

Number of first attendances:—

Under one year of age,	-	-	-	-	(884)	999
Over one year of age,	-	-	-	-	(190)	143

Total number of attendances:—

Under one year of age,	-	-	-	(6,474)	9,248
Over one year of age,	-	-	-	(3,955)	5,278

Illnesses recorded:—

Anaemia and debility, 414; respiratory conditions, 328; digestive conditions, 265; skin conditions, 204; dental conditions, 171; ear, nose and throat conditions, 88; septic conditions, 70; rickets, 60; eye conditions, 51; genito-urinary conditions, 49; infectious conditions, 49; glandular conditions, 30; accidents, 22; bone conditions, 5; mental deficiency, 2; no abnormality—advice given, 731; no abnormality—vaccination performed, 98.

SPECIAL TREATMENT CENTRES.—

Teeth—Corporation Dental Clinic.

Number of attendances:—

Mothers, expectant,	-	-	-	-	-	-	111
Mothers, nursing,	-	-	-	-	-	-	232
Children,	-	-	-	-	-	-	171

Work carried out:—

Mothers:—

Carious teeth extracted (local anaesthetic),	-	-	-	-	-	286
Gums treated,	-	-	-	-	-	54
Advice given,	-	-	-	-	-	3

Children:—

Carious teeth extracted (no anaesthetic),	-	-	-	-	-	170
Advice given,	-	-	-	-	-	1

Number of dentures supplied:—

Upper and lower dentures,	-	-	-	-	-	1
Upper dentures,	-	-	-	-	-	19

Eyes—Greenock Eye Infirmary.

Number of attendances:—

Children,	-	-	-	-	-	-	1054
Nursing Mothers,	-	-	-	-	-	-	2

Summary of conditions present:—

Conjunctival conditions, 74; refraction errors, 24; Corneal conditions, 22; injury, 14; ophthalmia neonatorum, 14; eyelid conditions, 13; lachrymal conditions, 5; ophthalmia, other, 3.

Mothers:—

Corneal conditions,	-	-	-	-	-	2
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Note—The figures in italics are the average figures for the last 5 years.

Ear, Nose and Throat Dispensary.

Number of attendances, children, - - - - 1,154

Summary of conditions found:—

Diseases of ear, 88; enlarged tonsils and adenoids, 51; diseases of nose, 19; diseases of lymphatic glands, 12; foreign body, 8; throat conditions, 3; injury to nose, 2.

Operations performed:—

Tonsillectomy and adenectomy, 41; mastoid, complete, 3; mastoid, incomplete, 1.

Other Ailments—Greenock Royal Infirmary.

Children:—

Number of attendances, - - - - 1,700
Number who received in-patient treatment, - 142

Summary of conditions found:—

Injuries and fractures, 258; septic conditions, 50; genito-urinary conditions, 43; digestive diseases, 40; bone and joint conditions, 27; ear, nose and throat conditions, 22; respiratory conditions, 18; skin conditions, 13; glandular conditions, 4; tuberculous conditions, 4; no abnormality, 2.

Mothers:—

Number of attendances, - - - - 23
Number who received in-patient treatment, - 4

Summary of conditions found:—

Gastro-intestinal conditions, 8; septic conditions, 6; bone and joint conditions, 3; gynaecological conditions, 3.

Ultra-Violet Light Clinic:—

Number of cases under one year of age, - - 24
Number of cases over one year of age, - - 164
Number of attendances, - - - - 3,544
Number of mothers attending, - - - - 3
Number of attendances, - - - - 24

Conditions treated:—

Children:—

Debility, 107; rickets, 64; glandular conditions, 6; others, 11.

Mothers:—

Abdominal conditions, 2; rheumatism, 1.

FOOD AND MILK :—

Milk, eggs and butter were provided as under :—

Milk :—

Mothers, expectant,	-	-	-	-	-	-	534
Mothers, nursing,	-	-	-	-	-	-	123
Children,	-	-	-	-	-	-	916

All of these cases were certified on medical grounds as requiring milk, and all were considered necessitous. In this way 27,051 gallons of milk were supplied during the year at an approximate cost of £2,791 6s.

Food :—

Number of eggs supplied,	-	-	-	-	-	9,485
Approximate cost,	-	-	-	-	-	£65 14 6
Pounds of butter supplied,	-	-	-	-	-	479
Approximate cost,	-	-	-	-	-	£24 10 0

Dried milk substitutes :—

Number of children,	-	-	-	-	-	135
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One thousand three hundred and ninety-three pounds of dried milk were provided at cost price, and 1,628 were given free at an approximate cost of £104 9s. 6d. in necessitous cases.

BABY OUTFITS :—

Number of Baby Outfits supplied at reduced cost in necessitous cases (began 30th May),	-	-	-	-	-	341
Approximate net cost,	-	-	-	-	-	£70 0 0

MEASLES :—

Number of cases notified (notification voluntary by householder),	-	-	-	-	-	762
Number of deaths, { from measles,	-	-	-	-	-	3
{ from sequelae included above,	-	-	-	-	-	2
Number of cases removed to hospital,	-	-	-	-	-	9
Number of special domiciliary visits,	-	-	-	-	-	1,466
Number of special staff engaged,	-	-	-	-	-	1

WHOOPIING COUGH :—

Number of cases notified (notification voluntary by householder),	-	-	-	-	-	626
Number of deaths, { from whooping cough,	-	-	-	-	-	26
{ from sequelae, included above,	-	-	-	-	-	17
Number of cases removed to hospital,	-	-	-	-	-	13
Number of special domiciliary visits,	-	-	-	-	-	288
Number of special staff engaged,	-	-	-	-	-	1

During the year a special clinic for the vaccine treatment of cases of whooping cough was held once weekly at Terrace Road Clinic. The treatment consisted of one injection weekly on three consecutive weeks, and the results were found to be satisfactory. Two hundred and eighteen cases received treatment as follows :—

1 injection,	-	-	-	-	218
2 injections,	-	-	-	-	181
3 injections,	-	-	-	-	157

OPHTHALMIA NEONATORUM:—

Number of cases notified,	{ by medical practitioners, — by midwives, - - - 26 by institution, - - - — }	26
Number of cases proved to be gonococcal,	- - - -	—
Number of cases treated in the Eye Infirmary (out-patients),	- - - -	14
Number of cases removed to hospital,	- - - -	—
Number of cases in which there was an appreciable loss of vision,	- - - -	—

PROVISION OF MIDWIFERY SERVICES IN NECESSITOUS CASES:—

Cases under investigation at 1st January, 1935,	- -	155
Number of applications received,	- - - -	778
Number of applications granted,	- - - -	523
Number of applications not granted,	- - - -	282
Maternity benefit,	- - - -	258
Income over scale,	- - - -	5
Late application,	- - - -	1
Other reasons,	- - - -	18
Number of applications dealt with by Committee (included above),	- - - -	43
Number of applications under consideration at 31st December, 1935,	- - - -	128
Number of fees paid for attendance at abortions,	-	36
Total expenditure,	- - - -	£596 12 6

GREENOCK CORPORATION MATERNITY HOSPITAL.

	Mothers.	Children.
Number in hospital at 1st January, 1935,	- 5	5
Number of admissions during 1935,	- 230	2
Number of live births,	- —	175
Number of stillbirths,	- —	*27
Number of deaths,	- 5	3
Number of discharges,	- 224	174
Number in hospital at 31st December, 1935,	- 6	5

*Includes one set of twins both stillborn.

Analysis of admissions:—

Ante-natal cases,	- - - -	34
Abnormal and complicated confinements,	- - - -	74
Other cases of confinement,	- - - -	117
Abortions,	- - - -	1
Post-natal cases,	- - - -	4
Total admissions,	- - - -	230

(1) Ante-natal cases, - - - - 34

Condition Found.	Result of Treatment.
11 Albuminuria, - - - -	6 discharged undelivered; 2 delivered, discharged well: 1 delivered, stillbirth, discharged well: 1 delivered, retained placenta, discharged well: 1 hyperemesis, surgical induction stillbirth, discharged well.
2 Cardiac Disease and Albuminuria, - -	1 delivered, stillbirth discharged well: 1 forceps delivery, eclampsia, died.
1 Pyuria, - - - -	delivered, baby died, discharged well.
1 Hyperemesis, - - - -	treated, discharged undelivered.
1 Antepartum Haemorrhage and Albuminuria, - - - -	died undelivered.
1 Ante-natal observation, - -	contracted pelvis, discharged undelivered.
17 False Labour, - - - -	treated and discharged well.

(2) Abnormal and Complicated Confinements, - - - 74

Condition Found.	Result of Treatment.
20 Contracted Pelvis, - - - -	4 Caesarean Section, discharged well: 1 Caesarean Section, twins—1 stillbirth, 1 alive—died: 1 Caesarean Section, breech, transferred to Gateside Hospital: 3 forceps delivery discharged well: 5 forceps delivery stillbirth, discharged well: 1 perforation, forceps, stillbirth, discharged well: 1 perforation, forceps, stillbirth, transferred to Greenock Infirmary: 3 delivered, discharged well: 1 delivered, baby died, discharged well.
7 Prolonged Labour, - - - -	3 delivered, discharged well: 3 forceps delivery, discharged well: 1 forceps delivery, hydrocephalic stillbirth, discharged well: 1 forceps delivery, cord presentation, stillbirth, discharged well.
4 Cardiac Disease, - - - -	2 delivered, discharged well: 1 forceps delivery, discharged well: 1 delivered, died.
8 Antepartum Haemorrhage, -	1 delivered, discharged well: 3 toxæmia, delivered, stillbirth, discharged well: 1 placenta prævia, version, stillbirth, discharged well: 1 placenta prævia, delivered, discharged well: 1 placenta prævia, baby died, discharged well: 1 placenta prævia, stillbirth, discharged well.
1 Prolapsed Cord, - - - -	delivered, stillbirth, discharged well.
2 Face Presentation, - - - -	delivered, discharged well.
1 Hand presentation, - - - -	forceps delivery discharged well.
1 Foot presentation, - - - -	delivered, discharged well.
2 Breech presentation, - - - -	1 delivered, stillbirth, discharged well: 1 twins, breech and vertex, delivered, discharged well.
1 Primary Uterine Inertia, -	delivered, discharged well.
1 Epileptic, - - - -	delivered, discharged well.
1 Hyperemesis, - - - -	delivered, stillbirth, hydramios, discharged well.

Condition Found.	Result of Treatment.
3 Eclampsia, - - - -	1 delivered, stillborn twins, breech and transverse, version, transferred to Greenock Infirmary: 1 delivered, stillbirth, adherent placenta, discharged well: 1 delivered, stillbirth, discharged well.
1 Albuminuria, - - -	delivered, discharged well.
9 Retained Placenta, - -	delivered, discharged well.
2 Adherent Placenta, - -	1 delivered, discharged well: 1 post-partum haemorrhage, died.
10 Delayed Second Stage, - -	1 delivered, discharged well: 5 forceps delivery, discharged well: 1 version and forceps, stillbirth, discharged well: 1 forceps delivery, adherent placenta, discharged well; 1 perforation, version, stillbirth, transferred to Greenock Infirmary: 1 transverse, version, discharged well.

(3) Other Cases of Confinement, - - - - - 117

(4) Abortions, - - - - - 1

Condition Found.	Result of Treatment.
1 Complete Abortion, - -	treated, discharged well.
(5) Post-natal cases, - - - - -	4

Condition Found.	Result of Treatment.
1 Eclampsia, - - - -	treated, discharged well.
1 Retained Membrane, - -	treated, discharged well.
1 Traumatic Postpartum Haemorrhage, - - - -	treated, discharged well.
1 Transferred from ship, - -	discharged well.

Other information:—

(a) Number of normal deliveries, - - - -	113
(b) Number of cases delivered without medical attendance at delivery, - - - -	150
(c) Number of instrumental deliveries, exclusive of those appearing under (2), - - - -	4
(d) Number of cases of puerperal fever removed from institution, - - - -	—
(e) Number of cases of puerperal pyrexia, - - -	2
(f) Number of cases under (e) in which delivery was instrumental, - - - -	—
(g) Number of deaths, - - - -	5
Caesarean Section and Septicaemia, -	1
Postpartum Haemorrhage, adherent placenta, 1	
Toxaemia of Pregnancy antepartum haemorrhage, undelivered, - - - -	1
Endocarditis, eclamptic convulsions, -	1
Myocarditis, delivered, - - - -	1
(h) Number of infants born { Alive, - - - -	175
{ Stillborn, - - - -	27
Number of sets of twins, - - - -	3

- (i) Number of deaths of infants under 8 days old, - 3
 Number of deaths of infants over 8 days old, - 0
- (j) Streptococcus antitoxin was given after delivery in 34 cases of abnormal or difficult confinement with the following result:—(includes 1 normal delivery).
- | | | | |
|------------------------------------------|---|---|----|
| Puerperium normal, | - | - | 24 |
| Rise of temperature, | - | - | 7 |
| Transferred to Greenock Royal Infirmary. | - | - | 2 |
| Died, | - | - | 1 |
- (k) Number of cases transferred to Greenock Royal Infirmary on account of pressure on accommodation, - - - - - 2

HOSPITALS FOR SICK CHILDREN:—

Children's Hospital, Shaw Place:—

Number in hospital as at 1st January, 1935,	-	-	27
Number admitted during the year,	-	-	118
Number discharged,	-	-	87
Number died,	-	-	30
Number remaining in hospital at 31st Dec., 1935,	-	-	28
Average period of residence,	-	-	97.7 days

The following were the conditions present and the results of treatment during 1935:—

CONDITION.	Cases in hospital 1st January, 1935	Cases admitted	Improved.	Not Improved.	Died.	Removed to Gateside Hosp.	Removed to Royal Infirmary.	Removed to St. Andrew's Home, Millport.	Rem'd to Royal Hospital for Sick Child'n, Glasgow.	Cases remaining in Hospital 31st Dec., 1935
Anaemia and Debility,	15	25	28	3	4	1	...	...	...	4
Gastro-enteritis,	2	21	11	...	5	...	...	...	...	7
Pneumonia, ...	2	12	9	...	2	...	...	...	...	3
Rickets,	2	4	5	...	...	...	...	...	...	1
Skin conditions,	2	8	6	...	...	...	...	...	...	4
Marasmus,	...	17	1	1	9	...	1	...	...	5
Bronchitis,	1	14	3	1	5	2	...	...	...	4
Convulsions,	...	7	3	...	3	1	...	...	...	...
Septic conditions,	2	2	3	1	...	...	...	...	...	...
Other Conditions,	1	8	3	1	2	1	...	1	1	...
TOTAL,	27	118	72	7	30	5	1	1	1	28

Six cases of infectious disease occurred during the year. Two cases of diphtheria and 4 cases of measles were removed to the infectious diseases hospital.

CONVALESCENT HOMES :—

Debilitated mothers after confinement are admitted to the Mission Coast Homes, Saltcoats, along with their babies.

Number of admissions,	-	-	27
Average period of residence,	12.5	days	

MIDWIVES (SCOTLAND) ACT, 1915.

During 1935 certified midwives attended 74 per cent. of the total births in the burgh, as against 75 per cent. last year. This figure shows a downward tendency.

Medical assistance was called in by midwives in approximately 43 per cent. of their cases. This shows a slight decrease on last year's figure of 44 per cent., but is still much higher than in previous years.

BIRTHS :—

Total number of births (notified),	-	-	-	-	-	-	1,756
Total number of deaths of new-born children,	-	-	-	-	-	-	41
Number of births attended by midwives,	-	-	-	-	-	-	1,293
Number of deaths of new-born children occurring in the practice of midwives,	-	-	-	-	-	-	27
Number of cases not attended by doctor or midwife,	-	-	-	-	-	-	1

CASES OF OPHTHALMIA NEONATORUM :—

Total number of cases,	-	-	-	-	-	-	26
Number of cases occurring in the practice of midwives,	-	-	-	-	-	-	26
Number of cases not attended by doctor or midwife,	-	-	-	-	-	-	—

CASES OF PUERPERAL SEPSIS :—

Total number of cases,	-	-	-	-	-	-	1
Total number of deaths,	-	-	-	-	-	-	—
Number of cases occurring in the practice of midwives,	-	-	-	-	-	-	—
Number of cases not attended by doctor or midwife,	-	-	-	-	-	-	—

CASES OF PUERPERAL PYREXIA :—

Total number of cases,	-	-	-	-	-	-	12
Total number of deaths,	-	-	-	-	-	-	2
Number of cases occurring in the practice of midwives,	-	-	-	-	-	-	5
Number of deaths occurring in the practice of midwives,	-	-	-	-	-	-	—
Number of cases not attended by doctor or midwife,	-	-	-	-	-	-	1

CASES OF STILLBIRTH (DEAD BORN CHILDREN) :—

Total number of cases during 1935,	-	-	-	-	-	-	83
Actual number of cases occurring in the practice of midwives during 1935,	-	-	-	-	-	-	50

CASES OF EMERGENCY :—

There were 551 cases of emergency, namely :—

Ante-natal.—

Ante-partum haemorrhage, 34; Eclampsia, 2; Illness of mother, 42; Oedema, 9; Threatened and complete abortion, 44.

Intra-natal.

Abnormal presentation, 50; Adherent Placenta, 9; Contracted pelvis, 24; Delayed labour, 85; Maternal distress, 9; Prolapse of cord, 1; Torn perineum, 116; Uterine inertia, 4.

Post-natal.

Illness of mother, 15; Pyrexia, 14; Post-partum haemorrhage, 12.

Child.

Abnormality, 3; Illness of child, 29; Prematurity, 23; Stillborn, 26.

NOTIFICATION :—

The following notifications required under the rules of the Central Midwives Board and the Public Health (Ophthalmia Neonatorum) Regulations (Scotland), 1918, were received :—

Notification of stillbirth, - - - - -	31
Notification of having advised artificial feeding, -	13
Notification of death, - - - - -	14
Notification of having laid out a dead body, - -	10
Notification of liability to be a source of infection, -	0
Notification of ophthalmia neonatorum, - - -	26
Notification of patient's failure to follow advice, -	96

SUPERVISION :—

Forty-eight midwives notified their intention to practice within the burgh, but only 29 were actually in practice. Of the latter, 1 resided in the burgh of Port-Glasgow.

One hundred and ten supervisory visits were made by the Inspectors of Midwives during the year. The work of the midwives was on the whole satisfactory.

All the expectant mothers referred to as having failed to follow advice given by their midwife were visited by the health visitors, with the following results.—

Stated that own doctor was in attendance, -	3
Promised to call in own doctor, - - - -	41
Confinement found to be over or due, - -	9
Refused to attend ante-natal clinic or to seek medical advice, - - - -	12
Persuaded to attend ante-natal clinic, - -	31

This measure still continues to be of value.

VENEREAL DISEASES.

MALES.—

No important changes fall to be recorded in the year under review. Almost the whole of the work of the venereal diseases scheme is carried out at the Special Treatment Clinic in the grounds of Greenock Royal Infirmary, where out-patient treatment is provided. There is no accommodation available within the burgh for in-patient treatment, but four beds are available in Craw Road Hospital, Paisley, when any case requires hospitalisation.

New Patients.—

Of the 132 new cases who reported for examination during 1935, 98 were from Greenock, 14 from Port-Glasgow and 5 from Gourock while 1 was from the landward portion of Renfrewshire, and 4 from districts outwith the county. The remainder, 10 in number, were shipping cases.

The following Table gives comparative figures for the years during which the clinic has been in operation:—

Year ending 31st December.	New Cases.	Attendances at Clinics.	Attendances at Centre.	Total Attendances.
1923	182	1,592	5,970	7,562
1924	160	2,054	6,436	8,490
1925	178	2,363	7,707	10,070
1926	176	2,923	10,118	13,041
1927	189	2,845	11,245	14,090
1928	194	3,083	11,468	14,551
1929	182	3,373	7,188	10,561
1930	179	3,043	7,351	10,394
1931	147	2,723	6,039	8,762
1932	130	3,035	6,590	9,625
1933	100	2,883	5,272	8,155
1934	109	3,376	7,030	10,406
1935	132	3,120	7,462	10,582

It will be noted that there is an increase in the total number of new cases over last year's figure, but this total is under the average for the past five years, showing that the tendency is towards decrease, although it must be remembered that the figures will show some such oscillation every year. Furthermore, it is perhaps natural that in Greenock the incidence of venereal disease should thus vary from year to year, for in Greenock we have, first, a seaport town, which means periodic introduction of extraneous sources of infection, and, secondly, a town whose industrial activity tends to experience a comparatively sudden rise and fall, e.g., in shipbuilding, with corresponding changes in economic conditions.

The rise in this year's total is due mainly to an increase in the number of early cases of syphilis. While any increase in the incidence of infection is to be deplored, it is, nevertheless, reassuring to a certain extent to find that patients are reporting for treatment earlier in the course of the disease, for syphilis in its early stages is essentially curable. In 1934 those cases of syphilis reporting for treatment which could be regarded as early cases amounted to 55.6 per cent. of the total. In 1935, this figure had risen to 85.4 per cent. Given early and adequate treatment it is safe to say that the late manifestations of syphilis will not develop, and that in future years there will be a steady diminution in the incidence of the late disabling effects of the disease.

The different types of cases dealt with were as follows:—

Type of Case.	On register 31st Dec., 1934.	New Cases.	Returned for further treatment	Ceased to attend	Transferred to other centres.	Discharged Cured.	Died	Remaining 31st Decem- ber, 1935.
Syphilis,	69	42	1	14	11	5	3	79
Gonorrhoea,	37	68	...	21	12	38	...	34
Soft chancre, ... ..	...	...	...	...	...	...	...	...
Non-specific venereal infections,	...	9	...	...	...	9	...	...
Conditions other than venereal,	2	13	...	...	...	15	...	...

This gives a defaulter rate of 12.5 per cent. in the case of syphilis, and in the case of gonorrhoea 20 per cent. The defaulter rate in gonorrhoea has remained stationary now for some years; the rate of default in the treatment of syphilis shows a definite downward tendency, which is probably related

to the increasing proportion of cases in which treatment is instituted in the early stages of the disease. In the absence of any legislation, local or general, to compel attendance for treatment, these defaulter rates must be considered fairly satisfactory.

Of the 42 new cases of syphilis reporting for treatment, 25 were in the primary stage, 10 in the secondary, and 6 in the later stages of the disease. In the remaining single case the infection was of congenital origin, and the patient reported at the age of twenty-one.

At the beginning of the year, one patient was receiving in-patient treatment for syphilis at Craw Road Hospital, Paisley, and during the year one patient was admitted to the same institution suffering from syphilis. The average duration of stay in hospital was 37 days.

During the year 173 specimens of blood were investigated, as regards Wassermann reaction, in the Public Health Laboratory, Glasgow, while in the clinic there were examined 62 scrapings for spirochaetes, and 1,068 smears for gonococci.

FEMALES.—

The new clinic premises in Terrace Road have given every satisfaction during the year. No changes of note have been carried out.

The following table gives the comparative figures for the years during which the clinic has been in operation:—

Period under Review.	New Cases	Attendances at Clinics.	Attendances at Centre.	Total Attendances.
24th November to 31st December, 1929.	12	107	7	114
1930.	100	1,209	127	1,336
1931.	123	2,061	458	2,519
1932.	93	2,064	652	2,716
1933.	101	2,127	1,077	3,204
1934.	79	1,884	1,075	2,959
1935.	112	1,697	1,163	2,860

Eighty-six specimens of blood were examined by the Wassermann test at the Public Health Laboratory, Glasgow, and 333 smears for gonococci were dealt with at the centre.

The following table gives information regarding the type of cases:—

TYPE OF CASE.	On Register 1st Jan., 1935	New Cases.	Returned for further treatment.	Ceased to attend.	Transferred to Other Centres.	Discharged.	Died.	Remaining 31st Dec., 1935.
Syphilis, - -	43	21	4	15	—	3	1	47
Gonorrhoea, -	30	39	1	27	1	7	1	34
Soft Chancre	—	—	—	—	—	—	—	—
Non-specific venereal infections,	—	—	—	—	—	—	—	—
Conditions other than venereal,	16	55	—	—	—	58	—	13

This gives a defaulter rate of 22 per cent. in the case of syphilis and 38 per cent. in the case of gonorrhoea. Last year these figures were 9 per cent. and 31 per cent. respectively, while in 1933 they were 28 per cent. and 47 per cent.

Of the 21 cases of syphilis which came under treatment for the first time during 1935 one was in the primary stage, 2 in the secondary stage, and 12 in the later stages of the disease, while 6 suffered from congenital syphilis, the age groups being under 1, 2; 5-15, 2; 15-25, 1; and 25 years and upwards, 1.

One patient was removed to Craw Road Hospital, Paisley, on account of gonorrhoea, and the period of treatment in hospital was 70 days.

CO-OPERATION BY THE PUBLIC.

The Corporation, through its Public Health Department and otherwise, provides a multiplicity of services for the community as a whole and for the personal benefit of many individuals in it. It would seem only fair, therefore, that such persons who personally and directly benefit from the services provided should make sensible use of them and so contribute to the general welfare. A great many do this conscientiously and honestly, but there are others who unfortunately do not, but are swayed by their own personal desires without thought of others.

Under the Child Welfare Scheme much is done and much good advice is given regarding the proper care of children, but still we find infants in picture houses, or being carried about

in all weather at all times in the evening; indeed it is no uncommon sight to see babies in arms out in the neighbourhood of midnight in inclement weather despite the fact that adequate rest for babies is well known to be essential for their health.

Again it is an undoubted fact that vaccination has practically banished the scourge of smallpox from this country, and yet we find that over 70 per cent. of the young children in the burgh are unvaccinated and thus quite unprotected against the most infectious and most disfiguring of all infectious diseases. This cannot be due to the cost as vaccination is carried out free at the child welfare clinics.

The Corporation is providing houses for slum clearance and overcrowding, and an opportunity is afforded many who have never had it to appreciate the benefit of a good home of which they can well be proud. The majority of tenants thoroughly appreciate this privilege and make good, but we always have the apparently inevitable minority who do not rise to the occasion. There is little excuse for them, except their own indifference, as they get every help and encouragement. In addition to this, however, the external appearance of housing schemes has a definite psychological effect on those who live there and it is thus to the advantage of the tenants to try and prevent the extensive damage and disfigurement that occurs. It may be said that this is done by thoughtless youths and children, but surely it is the duty of all parents to try and prevent by example, advice, and if necessary by action, this vandalism which mars good work and tends to quench the enthusiasm of those who exert their energy to try and make their town a happier, prettier and better place.

A considerable volume of propaganda regarding venereal disease has been carried out in the burgh, and the danger of promiscuous sexual intercourse has been repeatedly made known, but from experience at the treatment centres provided by the Corporation, it is quite obvious that a great many of the young people frequently "take the risk" and the result is inevitable. If nobody took the risk venereal disease would disappear from the community in a very short time. Anybody who has any thought for others alive or to be born has no right to take that risk. Again there are some who have contracted venereal disease and who come for treatment, but who, before they are rendered non-infectious, cease to attend and begin to spread the disease to others. To try and persuade or reason

with them seems to be of little avail, and it would seem that only legal powers would be of any use, but these do not exist as yet.

The Local Authority carries out much useful work in connection with infectious disease, and much useful information is spread by the Public Health Department regarding it. Yet we often find that, instead of isolating children with measles, whooping cough or chickenpox, parents allow them out in the early stages to play with other children in the close or green or to visit other houses, while it must certainly be obvious that this is not for the good of the patient nor fair to neighbours or the community as a whole.

It is well known, too, that the filthy habit of spitting on pavements and streets is a dangerous one, in so far as the spit may contain germs of tuberculosis or other diseases. When the spit becomes dry the germs mix with the dust and are blown into the air, into shops and houses, and are ready to infect susceptible persons. Still spitting goes on.

The community is providing good services and these are doing much valuable work, but they could do much more if all individuals gave thought to their conduct and to the welfare of others, as well as to their own desires.

There are many things that are still lacking and others that could be improved in the facilities provided, but additions and improvements are continually being made. Much greater provision for example is required for outdoor recreation, and to get the greatest benefit out of this, some form of organisation, supervision and direction is required. More open spaces, football pitches, cricket grounds, tennis courts, putting greens, and bowling greens are needed. An indoor swimming pool of adequate size and modern design would be a boon to the town, allowing, as it would, one of the most healthful of all recreations to be carried on all the year and in all weathers.

More extensive teaching on the soundest methods of spending money on food and clothing and in the knowledge of food values, cookery and housewifery generally would certainly repay the cost if those who most required it could be got to attend: then it might be possible to see the end of the despotic rule of the tin opener and the frying pan.

Time and education have brought improvement, but it is all too slow, slower far than it need be.

HOSPITAL ACCOMMODATION AND AMBULANCE ARRANGEMENTS.

GREENOCK AND DISTRICT COMBINATION HOSPITAL, GATESIDE:—

By the end of 1934 the number of admissions to the hospital was back to its normal level. There was no difficulty during the year in arranging for the admission of patients.

In January the tuberculosis wards, which had been closed for nearly three years, were re-opened for the treatment of patients suffering from that disease.

The Hospital Board decided during the year to build a nurses' home, but several difficulties came in the way, and at the end of the year building had not commenced. In March, 1936, however, the Department of Health finally agreed to the provision of a nurses' home to accommodate thirty-six nurses. This added accommodation will make possible the treatment of cases of measles, whooping cough and pneumonia to a considerable extent in the future, and is a long overdue provision.

I am indebted to the Medical Superintendent for the following information regarding the treatment of cases and the results obtained:—

1.—CASES TREATED CLASSIFIED ACCORDING TO DISEASE.

DISEASE.	Cases in Hospital 1st January, 1935.	Admitted during 1935.	Discharged during 1935.	Died during 1935.	Cases remaining in Hospital 31st December, 1935.	Fatality Rate.
Diphtheria, ...	19	238	215	6	36	2.33
Erysipelas, ...	1	38	38	...	1	...
Scarlet Fever, ...	17	132	137	2	10	1.34
Puerperal Fever, ...	...	7	4	3	...	42.85
Measles, ...	1	13	14	...	...	...
Tuberculosis, ...	...	51	32	11	8	21.56
Chickenpox, ...	...	5	1	...	4	...
Enteric Fever, ...	...	6	4	1	1	16.66
Other Diseases, ...	2	31	19	11	3	33.33
Total, ...	40	521	464	34	63	6.06

II.—CASES CLASSIFIED ACCORDING TO DISTRICTS FROM WHICH ADMITTED.

DISTRICT.	Cases in Hospital 1st January, 1935.	Admitted during 1935.	Discharged during 1935.	Died in Hospital.	Cases remaining in Hospital 31st December, 1935.
Greenock, ...	28	330	295	32	31
Gourock, ...	8	95	81	2	26
Port-Glasgow, ...	2	91	83	..	10
County, ...	2	5	5	..	2
Total,	40	521	464	34	63

III.—AVERAGE PERIOD OF RESIDENCE OF PATIENTS DISCHARGED DURING 1935.

DISEASE.	Discharged during 1935.	Aggregate Number of Days' Residence.	Average Days' Residence.
Scarlet Fever, ...	137	5,779	42
Diphtheria, ...	215	9,449	43

IV.—CASES ADMITTED FROM THE BURGH OF GREENOCK CLASSIFIED ACCORDING TO DISEASE.

DISEASE.	Cases in Hospital 1st January, 1935.	Admitted 1935.	Discharged 1935.	Died 1935.	Cases remaining 31st December, 1935.	Fatality Rate.
Scarlet Fever, ...	11	88	92	2	5	2.02
Diphtheria, ...	14	117	116	4	11	3.05
Tuberculosis, ...	..	51	32	11	8	21.56
Measles, ...	1	11	12	..	..	...
Enteric Fever, ...	..	6	4	1	1	16.66
Erysipelas, ...	..	21	21	..	..	...
Chickenpox, ...	..	5	1	..	4	...
Puerperal Fever, ...	..	6	3	3	..	50.00
Pneumonia, ...	..	7	1	4	2	57.14
Whooping Cough, ...	..	12	7	5	..	41.66
Other Diseases, ...	2	6	6	2	..	25.00
Total, ..	28	330	295	32	31	68.93

WEST RENFREWSHIRE COMBINATION SMALLPOX HOSPITAL.

No case of smallpox occurred during the year and the arrangements in connection with this hospital remained unchanged.

SMITHSTON HOSPITAL.

Information regarding the hospital section of Smithston Institution will be found under "Medical Care and Nursing of the Sick Poor."

AMBULANCE ARRANGEMENTS.—

There has been no change in these services during the year. They remain efficient and satisfactory.

MEDICAL CARE AND NURSING OF THE SICK POOR.

(I). NURSING SERVICE.

The home nursing of the sick poor, was, as formerly, carried out by the Greenock and District Nursing Association under the direction of the District Medical Officers. This service is very satisfactory and is able to deal with all cases requiring attention. An annual grant is paid to the Association by the Corporation in virtue of this work.

(II). MEDICAL SERVICE.

General.

The arrangements whereby two doctors carried out the general work continued during the year, but, as stated in previous years, this cannot be said to be entirely satisfactory. This whole matter will require to be investigated and the service adjusted to modern ideas in the near future.

The following number of persons received outdoor medical relief during the year:—

Males,	-	-	-	-	2,806
Females,	-	-	-	-	3,213
Children,	-	-	-	-	3,204
					<hr/>
Total,	-	-	-	-	9,223
					<hr/>

Mental.—

In February a clinic for early mental cases was agreed upon by the Corporation, and on 25th March the first clinic in the Public Health Department was actually held. It was arranged that a session should be held once a month to begin with and that only cases referred by medical practitioners should be seen. Only two patients, however, presented themselves during the year, and in December it was agreed to alter the name of the Clinic to "Clinic for Nervous Disorders" and to throw it open to the public in general, without particular reference by a medical practitioner.

As the provision of medicine is in some cases a useful adjunct, it was agreed that the cost of necessary drugs in necessitous cases should be provided out of the Common Good Fund.

It will be interesting to see how this clinic develops in the future.

No observation beds for this type of case are yet available, but it is hoped that arrangements will be made in due course.

A Child Guidance Clinic was started by a voluntary organisation in September, and for this purpose the use of the child welfare clinic premises was granted. This is a progressive step and the experiment will be watched with interest.

III.—INSTITUTIONAL MEDICAL ARRANGEMENTS:—

Hospital.—

The hospital section of Smithston Institution still remains unsatisfactory. On account of pressure on the accommodation in the female wards, it was found necessary in September to make use of the portion of the female poorhouse nearest to the hospital and convert it into hospital accommodation for approximately thirteen patients. It relieved the congestion for the time being.

This necessity raised the whole question of the substitution of the hospital section of Smithston Institution by a new and up-to-date general hospital, which matter was receiving the attention of the Corporation at the end of the year.

DR. LEGGETT'S ANNUAL REPORT ON SMITHSTON POORHOUSE.

I beg to submit the following report, arranged as far as possible on the lines indicated in Public Assistance Circular No. 29, Appendix B., issued by the Department of Health for Scotland on the 7th January, 1933.

Since the question as to whether this Institution is suitable or adaptable for the purpose of treating sick persons on modern lines appears to have been definitely settled both by the Local and the Central Health Authorities, it is unnecessary for me to repeat the statements made in my report of 1933 on the matter.

All the difficulties concerning classification, isolation, etc., referred to in the last report continue to exist.

A considerable amount of repair work was carried out during the year throughout the institution and still more is urgently necessary, the most noticeable examples being the floor of the corridor leading to the hospital section and that of the large male hospital ward. In both cases the woodwork is in a very bad state and requires immediate attention.

Sufficient beds were available for male admissions during the year. In the early part of the year, considerable difficulty was found in providing accommodation for female sick, and in consequence the Council were compelled to convert two rooms on the ground floor of the female poorhouse into wards for hospital cases. Bathing and W.C. accommodation was installed adjacent to these wards, which serve their purpose as a temporary measure. By this means threatened congestion was overcome.

The provision of more suitable accommodation for maternity patients and sick children continues to be a matter requiring urgent attention.

With the consent of the Health Department, the Tuberculosis Pavilion was vacated, and, with the sanction of the Board of Control, made available for the accommodation of 24 male mental cases.

The usual proportionate number of nurses was engaged in carrying out the duties necessary to the particular type of patient admitted to the institution. Some difficulty, however, is being experienced in securing an adequate number of general trained staff.

The patients are provided with sufficient food, and extra sick diet, e.g., milk, eggs, fish, bovril, etc., are always available and are supplied in all cases where advisable. The Council does not restrict the Medical Officer in the matter of providing whatever food and medicine appears to be reasonably necessary towards improving the health and well-being of the patients.

Practically the whole institution has been furnished with new bedsteads, and an ample supply of bedclothing is usually available. Many of the patients admitted, being helpless and faulty in habits, are very severe on clothing, and, in consequence, the number of articles sent to the laundry is, as a rule, considerable.

The heating and lighting of the wards is sufficient, but the hot water supply is not always satisfactory.

No difficulty arises in obtaining the drugs, surgical dressings and appliances which may be required for medical and nursing treatment.

The ultra-violet ray lamp continues to be a very great asset and is in constant daily use.

The wireless has been a source of interest and entertainment to the majority of the patients during the year.

At 31st December, 1934, there were 93 sick persons in residence in the hospital wards, consisting of 50 men and 43 women. During the year 1935 there were admitted 142 men, 76 women, 7 boys and 7 girls, including 3 male and 2 female infants born in the institution—that is, a total of 232 admissions, making the number under treatment 325. Of this number 116 left the hospital wards as recovered, 23 as relieved, 64 died and 30 were removed for various reasons, e.g. as transfers to asylum and to Togo House. Four children accompanied their mothers on discharge. Eleven patients were under observation for their mental condition, and four of these were certified insane.

As compared with last year there were 45 fewer admissions. About 60 per cent. of those admitted recovered sufficiently from the disease from which they suffered on admission to justify their discharge.

Of those admitted, 99 were over 60 years of age, 47 being over 70, 13 over 80, and one aged 93.

A majority of the cases dealt with were suffering from bronchitis, disease of the heart and blood vessels, cerebral haemorrhage, various forms of paralysis, gastric and intestinal derangements, rheumatic conditions, skin diseases, cancer, varicose ulceration and septic sores, influenza, advanced senility, and a large number suffering from anaemia and debilitated states as the result of neglect, improper food, exposure and lack of attention to cleanliness and ventilation. The remainder were cases of ordinary acute illness, twelve cases of pregnancy and eleven for mental observation.

Fifty-two of those who died were over 60 years of age, 39 being over 70, 11 over 80, and 2 over 90.

The chief causes of death were those resulting from diseases of the heart and blood vessels, central nervous system, cancer, and the morbid changes resulting from senility, including gangrene.

The length of residence of those who died or were discharged varied from one day to 4,678 days.

Of the 14 children treated in hospital during the year, one child, aged 5 days, who had been in this hospital for only two days, died as the result of congenital malformation.

There were 5 confinements. This small number is accounted for by the fact that, during the greater part of the year, the ordinary accommodation for maternity cases was under repair, and 7 out of 12 cases admitted were sent to Togo House for confinement. There were no stillbirths, no cases of puerperal fever or deaths of infants born here during the year.

The position as regards administration, and the general facilities for the care and treatment of sick persons remains unchanged.

Asylum.—

The overcrowding on the male side of Smithston Asylum became acute during the year, and it was decided to evacuate the tuberculosis pavilion and utilise the building for the accommodation of male lunatics. This evacuation was actually carried out on 29th October, and provided a temporary solution of what was becoming almost an impossible problem.

The permanent arrangements for the abatement of overcrowding in the asylum were discussed by the Corporation, and preliminary arrangements were carried out for the provision of a new male block to be built in the grounds of the institution.

DR LEGGETT'S ANNUAL REPORT ON GREENOCK PAROCHIAL
ASYLUM.

I have the honour to submit the following report on the Greenock Parochial Asylum for the year ended 31st December, 1935.

GENERAL STATISTICS.—

On the 31st December, 1934, the number of patients on the asylum register was 263, of which 148 were men and 115 women. During the year under review 34 men and 13 women were admitted, so that the total number under treatment was 310, that is, 7 more than last year.

The number of patients discharged was 28. Of these 19 left the institution as recovered, 4 were transferred to other asylums, 4 were boarded out in Arran, and one was discharged "not insane" owing to lapse of emergency certificate.

The number of deaths was 15.

The names of 267 patients remained on the register on the 31st December, 1935, of which 154 were men and 113 women, being an increase of 6 men and a decrease of 2 women as compared with the corresponding date last year.

The daily average number resident was 265.

Five boarders were accommodated in the asylum for variable periods during the year, chargeable respectively to Glasgow, 1; Renfrew, 1; and H.M. Prison, 3, one of these being subsequently chargeable to Paisley and one to Dundee. The third man was returned to Prison to complete his sentence.

Six service patients were in residence at the end of the year, no change having taken place either as regards numbers or individuals. Five of these belong to the Burgh of Greenock and one to the County of Argyll. The cost of maintenance and of certain extras continues to be defrayed by the Ministry of Pensions, and this arrangement also applies to the case of an ex-serviceman not in the service patients' category. All these men were seen and interviewed by a Ministry of Pensions' Medical Inspector on the 21st September, who, in his subsequent report, after having expressed his indebtedness for the assistance given him during his visit, stated that he found "the six patients in residence well cared for in every way" and "the day rooms and dormitories clean and comfortable."

ADMISSIONS.—

The number of admissions was 47, consisting of 34 men—the highest number since 1927—and 13 women—the lowest number shown in available records, being an increase of 9 men and a decrease of 13 women as compared with last year. Thirty-one were admitted for the first time, one was returned from being boarded out, and 15 were re-admissions. Of the latter, 10 had 1, 3 had 3, 1 had 4, and 1 had 6 previous attacks. Two patients were admitted as transfers from other asylums, and 3 from H.M. Prison, Gateside. Two male patients were discharged and re-admitted during the year.

The following are the forms of mental disorder from which those who were admitted suffered:—Melancholia, 8; mania, 6; dementia praecox, 4; organic dementia, 4; dementia secondary, 3; moral deficiency, 3; congenital mental defect, 3; paranoia, 3; senile dementia, 2; post lethargic encephalitis psychosis, 2; feeble mindedness, 2; organic brain disease psychosis, 2; general paralysis, 1; delusional insanity, 1; drug addiction, 1; alcoholic insanity, 1; and exhaustion and psychosis, 1.

AETIOLOGY.—

The total number of admissions for the year differed by four from that of last year. There was an increase of nine males, but only half the number of females were admitted. The number of male admissions exceeded that of females by 21. This difference in numbers is much greater than is usually the case, the corresponding difference last year, for example, being only one.

The ages of those admitted ranged from 20 up to 75 years.

As regards causation, I am convinced that hereditary predisposition is the most important direct factor, and this was very pronounced and obvious in a large number of cases: six were congenital defectives, nine suffered from gross disorganisation of the brain and nervous system, and four from chronic alcoholism.

From long personal experience of interviewing relatives, and the information obtained from my observations and the family histories of patients, I am sure there can be no doubt about the importance of heredity. In this connection one is immediately impressed, when passing through the wards, by the large number of cases of adolescent insanity, which has been described as the most

heredity of all insanities. It is characterised by a profound alteration in character, and gradual but persistent intellectual deterioration, accompanied by increasing depraved and degenerate tendencies and habits, resulting in an undermining of the general bodily health. This type of case requires constant supervision, is useless for employment purposes, and is one of the causes of increasing congestion in asylums. Many of these adolescent psychotics are described by their parents as having been clever at school, and naturally they cannot understand why they should become mentally deranged, and, being young, why they should not recover. It is not always easy to inform parents frankly that such cases are hopeless—in fact that they are really congenital in type and tend to become progressively demented. The incidence of the change in the psychosis of these young people takes place often several years before hospitalization is found necessary, and it is during this period that parental control often fails, and, as a result of moral delinquency and lack of self control, these individuals may become troublesome members of the community. Changes in disposition leading to insanity are infrequent before the age of 15 years, but from this onwards, there is a gradual rise until 25, when the maximum incidence of the adolescent insanities is reached. It is scarcely necessary to state that the earlier the age after leaving school these delinquents are examined and put under supervision, the better it will be for themselves, their relatives, and the community. The development of vicious habits as a consequence of this form of mental disorder can be controlled to some extent, but the actual inherited mental disease itself rarely responds to treatment. Detoxication, environmental and hygienic measures should never be overlooked as possible ameliorating factors: such measures in fact at times produce remarkable improvement.

The institution of clinics for the recognition and treatment of early symptoms of nervous and mental disorders amongst adults is now considered a matter of importance. There are certain difficulties, however, which it is necessary to overcome before satisfactory results can be obtained. For instance, those requiring advice of this nature are most reluctant to attend if the designation of the clinic indicates any association with mental disease, which even now is looked upon as something to be ashamed of and treated with great secrecy. As a result a clinic known to be for the treatment of mental disorder appears to be avoided at all costs in case of possible criticism. Again, mere advice is not satisfactory; it is soon forgotten, and often it is not convenient to put advice into practice under

certain domestic surroundings: also some definite form of medicinal treatment is always considered necessary by the patient before results can be expected. The provision of such is, however, now possible in necessitous cases at the suggestion of the Medical Officer of Health, and with the approval of the Corporation.

Consequently, in order to gain satisfactory results it seems necessary that hospital accommodation—observation wards properly conducted—attached to the clinic, should be available. It is essential that this type of case should be under continuous supervision at least for a time in order that, if possible, a proper diagnosis be made and the cause of the trouble removed. Many early so called mental symptoms are due to bodily ailment, defects, and intoxications of various kinds and these should be dealt with; also relief from domestic and environmental influences, etc., may be found helpful and even necessary in order to provide physical and mental rest which are recognised as the most important factors towards a recovery.

DISCHARGES.—

The number of patients discharged during the year was 28. Of this number 19 left the institution as recovered, 4 were transferred to the asylums at Gartloch, Hawkhead, Dundee and Londonderry, 4 were boarded out, and one was discharged as "not insane."

Of those discharged recovered, 16 patients out of a total of 19 left the institution within a year, of whom 14 left within 6 months and 11 within 4 months.

The recovery rate for the year, calculated on all admissions, including transfers from other Asylums, is 40 per cent. which is quite satisfactory.

The periods for which the recoverable cases were detained appear to be not excessive and cannot reasonably be considered a source of complaint for the relatives.

DEATHS.—

Seven men and 8 women died during the year, being an increase of 2 men and 3 women as compared with last year.

The death-rate, calculated on the daily average number resident, is 5.6 per cent.

Eight patients died within a year, 4 of whom were in such a precarious state of health at the time of admission that they died within 10 days. All these patients were hopeless from the time of their admission, and there was no question of the mental condition improving; in fact the physical condition rather than the mental condition was the predominant feature. One female who died had been resident for 32½ years.

The certified causes of death were as follows:—Chronic Cardiac Disease, 2; Pneumonia, 2; Bronchitis and Asthma, 1; Asphyxia, 1; Peritonitis, Tuberculous, 1; Cancer of Breast, 1; Encephalitis, 1; Cerebral Meningitis, 1; Cerebral Haemorrhage, 1; Cerebral Disease with Epilepsy, 1; Organic Brain Disease, 1; Disease of the Central Nervous System, 1; Asthenia—Mental Derangement, 1.

There were no epidemic forms of illness amongst the patients and no escapes during the year.

On the 27th June a male patient, when taking part in a game of football at West Kilbride, where the patients were having a picnic, sustained a Pott's fracture and dislocation at left ankle. The usual treatment was carried out and the patient is now going about as usual.

Twelve patients are allowed parole in the grounds about the institution, and two male patients outside the grounds.

ENTERTAINMENT:—

The usual weekly dances, excursions by 'bus into the country, and concerts arranged by the Convener of Entertainments were provided. The wireless continues to be a source of interest, information and entertainment, and newspapers, books, card and other games are supplied.

The wards were tastefully and elaborately decorated at Christmas time by the nursing staff, chiefly at their own expense. A Christmas Tree laden with presents, and a tea party were also provided by the female nursing staff. Miss McKirdy and the ladies of the Brabazon Society entertained the female patients to tea and a concert. At the invitation of Mrs Clayton, Manageress of the B.B. Picture House, 100 patients and staff attended an afternoon performance of pictures, to which the party were conveyed by buses provided by Mr Dunlop. I am very grateful for the trouble that has been taken in these various ways in the interest of the patients, who benefit greatly and, I am sure, appreciate the kind thoughtfulness of those concerned.

ACCOMMODATION :—

On account of the increasingly congested state of the wards on the male side, it was found necessary to make some definite arrangement by which the accommodation for male patients could be extended. In consequence, the Council decided to erect a suitable building within the grounds to accommodate about 50 patients, the plans for which are at present under consideration. As the preparation for and the construction of this new building will extend over a considerable period, and the question of relieving congestion in the wards is urgent, it was decided, by arrangement with the Department of Health and the General Board of Control, to evacuate the tuberculosis pavilion and render it available for mental cases. On the 18th of November, 24 male patients were carefully selected and transferred to the pavilion, where they are now comfortably accommodated. This arrangement is found to be quite satisfactory in every way and the patients are pleased with their new surroundings.

A considerable amount of further attention has been given to the wards and corridors of the main building, especially on the female side. Ceilings, floors and walls have been extensively renewed or repaired, and the internal appearance of the building in this particular department is now greatly improved.

The new mortuary, post mortem room and chapel are now approaching completion.

STAFF.—

Attendant Donald John Robertson unfortunately developed enteric fever in November and had to be removed to Gateside Fever Hospital, where he died after an illness of about 2 weeks. He was a good attendant, respected and popular amongst the other members of the staff, and his early and unexpected death gave rise to much regret.

Another attendant developed diphtheria and was admitted to the fever hospital on the 19th December, where he still was a patient at the end of the year, but making satisfactory progress.

It was found necessary to send a nurse to the Greenock Royal Infirmary for treatment on the 21st December. She was subsequently discharged recovered.

Twelve other members of the nursing staff were off duty for short periods on account of minor ailments.

During the course of the year two attendants and two nurses passed the preliminary examination of the Royal Medico-Psychological Association, and two attendants and five nurses—one with distinction—qualified for the nursing certificate of the Association. The usual lectures, demonstrations and other assistance are given to the probationer staff by the Medical Officer and the Superintendent of Nurses.

It is a matter of the greatest importance that all probationers who are engaged should have most complete and detailed knowledge of the attitude and conduct they are expected to adopt towards the patients with whom they come in contact in the course of their duties. Mental nursing differs greatly from any other form of nursing, and exceptional common sense, tactfulness, patience and self-control are necessary in order to avoid what may be at times disastrous consequences, either to a patient or to a nurse. The passing of examinations is necessary and important, but unless a mental nurse is endowed with the proper temperament, satisfactory results cannot be expected.

That the efforts of the staff towards securing the comfort, health and recovery of the patients have again been reasonably successful, is shown by the present statistical returns.

H.M. Commissioner of the General Board of Control paid official visits on the 15th of February and 2nd October, and supplied satisfactory reports on the general care, attention, condition and treatment of the patients.

During the course of the year Dr. Hamilton C. Marr, Senior Commissioner, retired. Dr. J. C. Sturrock, the other Commissioner, on the eve of his retiral, unexpectedly died, to the great regret of his colleagues.

I have pleasure in acknowledging the loyal support and assistance of the nursing staff, and the courtesy and consideration shown to me by the Committee during the year.

BACTERIOLOGICAL EXAMINATIONS.

All bacteriological examinations of ordinary specimens connected with infectious disease were, as formerly, carried out by the Medical Superintendent of Gateside Hospital.

The following table gives the numbers and results of the examinations made:—

Nature of Specimen.	Positive.	Negative.	Total.
Throat mucus,	93	598	691
Sputum,	41	265	306
Blood,	4	11	15
Cerebro-spinal fluid, ... ..	...	4	4
Urine, ... ..	...	10	10
Vaginal smear, ... ..	...	1	1
Pus, ... ..	...	2	2
Total,	138	891	1,029

In addition, four special examinations were carried out at the Public Health Laboratory, Glasgow, chiefly for the isolation of enteric organisms, but all with negative result.

Seven specimens of material were examined by the biological test at the Slaughterhouse for the presence of tuberculosis, all with negative result.

In addition, eight specimens of urine were examined by the Friedman test for pregnancy by Messrs Evans, Sons, Lescher & Webb, Runcorn.

SERA, VACCINES, AND INSULIN.

ANTI-DIPHTHERIA SERUM.—The emergency supply of diphtheria antitoxin at the Public Health Office and the Central Police Station was kept up during the year. Seventy-two thousand units were purchased at a cost of £3 14s. 0d.

ANTI-SCARLATINAL SERUM.—The use of this serum was continued during the year. Four hundred and eighty ccs. were purchased at a cost of £20. Two hundred ccs. were issued to medical practitioners and two hundred and forty were used in the maternity hospital.

ANTI-MENINGOCOCCUS SERUM.—Fifty ccs. of this serum were purchased during the year but none was issued.

T.A.B. VACCINE.—Thirty-six inoculation sets of this vaccine were purchased at a cost of £8 2s. and sent to Smithston Institution for the inoculation of the asylum staff.

WHOOPIING COUGH VACCINE.—Twenty-five ccs. of this vaccine were issued during the year to General Practitioners for the treatment of cases in necessitous circumstances.

INSULIN.—Thirty thousand units of Insulin were purchased at a cost of £15 and 41,700 units were supplied to seven patients under the approved arrangements.

PORT SANITARY ADMINISTRATION.

During the year 69 liners inward bound from Canada were boarded by the staff of the department. This number is the same as last year, the figures for the past twelve years being as follows.

1924, - - -	12	1930, - - -	66
1925, - - -	24	1931, - - -	69
1926, - - -	20	1932, - - -	64
1927, - - -	28	1933, - - -	63
1928, - - -	49	1934, - - -	69
1929, - - -	63	1935, - - -	69

The total number of passengers landed from these ships was 7,527 of whom 983 were aliens and 19 aliens in transit to other countries. Ninety-four aliens were examined at the request of the Immigration Officers, but in no case was it necessary to issue a medical certificate.

No cases of infectious disease required removal to hospital during the year.

One hundred and twenty-two cargo ships were boarded by the staff of the department either at the anchorage, or in the harbours, and a general survey was carried out in each case. The chief articles of cargo discharged by 59 ships were sugar, bone meal, linseed, timber, cotton seed, molasses, and cattle. Fifty-eight ships docked for overhaul, 3 for bunkers, one to transfer machinery, and one after towing. In all cases rat guards or equivalent measures were insisted upon as formerly. On the whole these ships were maintained in fairly good sanitary condition and all defects discovered were pointed out for appropriate action. The health of the crews was good, and it was not necessary to remove any cases to hospital.

Thirty-five ships produced valid deratisation certificates and 62 valid exemption certificates, all issued in accordance with article 28 of the International Sanitary Convention of Paris, while 3 ships had valid certificates not on the recognised form.

Eight ships had deratisation certificates and 14 exemption certificates which were no longer valid, one of the latter not being on the recognised form. Fourteen of these had certificates issued to them and in six the Master's assurance was received that he would obtain a fresh certificate after proceeding to his home port, while three ships sailed without any action being taken.

Eight deratisation certificates were granted during the year, six after fumigation with Hydrogen Cyanide, 86 rats being recovered and two with Sulphur Dioxide, 4 rats being recovered. Thirty-nine exemption certificates were issued after due examination of the ship had been carried out.

A Rat Catcher was appointed early in the year, and since that time control of shipping in the port as far as rats are concerned has been very much more satisfactory. Daily supervision is now arranged for, and each ship is examined shortly after docking, and if traces of rats are found on board, trapping is immediately started and continued as long as appears necessary. In 9 vessels traps were set, and 96 rats were got by this means.

The Parrots (Prohibition of Import) Regulations (Scotland) continued during the year. One parrot was discovered and the appropriate notice was served on the owner of the bird and an undertaking received.

Registration of the telegraphic address "Portelth, Greenock" was continued during the year.

DISINFECTION.

HOUSE DISINFECTION.—

No change was made in the arrangements for house disinfection during the year.

Seven disinfections were carried out following diseases which were not considered infectious and an appropriate charge made in each case.

DISINFECTING STATION.—

The work at the disinfecting station was carried out on the same general lines as last year, and the equipment gave good service. During the period the usual overhauls and minor repairs of plant and buildings were carried out, but nothing of a major character was found to be necessary.

After consideration and investigation of the question of a formalin chamber it was decided to replace the existing disinfector, which was found to be defective, by a new disinfector and formalin generator, and arrangements were made accordingly. The apparatus, however, had not been installed at the end of the year.

The number of articles dealt with was 13,012, and of these 12,084 were disinfected and washed, 778 were disinfected only, while 150 were destroyed. Of the articles disinfected, 6,755 were subjected to steam under pressure, 5,638 were disinfected with antiseptic solution, while 469 were sprayed with formalin.

RECEPTION HOUSE.

The Reception House was only seldom used for the isolation of contacts of infectious disease during the year. Fifteen persons were housed for periods amounting in all to 22 days, the average stay per person being 1.46 days.

Ten of these persons were taken to the Reception House in order that satisfactory disinfection of house, bedding and personal clothing might be carried out on account of scabies, the disease being treated while the persons were in residence, and five were admitted for cleansing on account of vermin infestation.

As an alternative to the admission to the Reception House the arrangements made last year to provide blankets to any family who had not sufficient spare bedding to allow of proper disinfection being carried out was continued. Twelve families were thus provided with blankets on loan.

MILK AND DAIRIES.

Supervision—

The milk supply of the burgh received constant attention during the year and the previously described method of control by bacteriological examination was continued. From this it would appear that the milk on sale for human consumption is fairly satisfactory and is still improving.

The distribution of milk to children at the various schools was commenced during the year, and has undoubtedly served an excellent purpose, which can, with advantage, be extended, and indeed has been so to some extent, to offices, etc., where young people are employed. In connection with this matter,

some difficulty arose in respect of the condition of milk received in the burgh through the agency of the Milk Marketing Board from producers located at some distance, and which was of considerable age before it could be used in schools. This milk may have been of graded standard when it was produced, but it had certainly passed out of that class before it could be issued for the purpose for which it was received. The transport of milk over long distances may be quite satisfactory when proper receptacles and vehicles made for the purpose are used, but when a delicate product like milk is not carefully and sensibly handled, its state when it comes to the consumer is anything but satisfactory, as happened in the case mentioned above. Milk is too susceptible to outside influences to be bundled about like dry goods, and it can only be hoped that this fact will be realised, and suitable arrangements made by the Milk Marketing Board to deal with the distribution of a product which it is making such efforts to sell in increasing quantities.

Furthermore it is a matter for consideration whether the operations of the Board will not make difficult, or at times impossible, the tracing of sources of infectious disease in the milk supply on account of the multiplicity of hands through which it passes before reaching the consumer. So far, luckily, no problem of this kind has arisen in the burgh.

Grading of Milk.

Nineteen dealers' licences for certified milk, 3 bottling licences and 4 dealers' licences for Grade A (T.T.) milk, 1 dealer's licence for Grade A (Pasteurised) Milk, 2 producers' licences and 39 dealers' licences for pasteurised milk were granted by the Local Authority during the year.

The total daily consumpt of milk in the burgh is in the region of 6,600 gallons, of which approximately 1,900 are used for manufacturing processes. The daily consumpt of milk would therefore appear to be in the region of 0.47 of a pint per day per person. The percentage of graded milk on sale was again slightly increased and now comprises 50.59 per cent. of all the milk on sale, 5.96 per cent. being of certified standard, 5.70 per cent. of Grade A (T.T.) standard, and 38.93 per cent. pasteurised under licence.

The remaining 49.41 per cent. is made up of 13.17 per cent. bottled milk and 36.24 per cent. which is sold loose. Of the total supply, 63.76 per cent. is bottled, 50.59 per cent. being graded milk, and 13.17 per cent. ungraded. The 36.24 per cent. sold loose is made up of 6.14 per cent. pasteurised, 10.87 per cent. quasi-pasteurised, and 19.23 per cent. untreated.

Bacteriological Examinations—

Under the scheme for bacteriological examinations, 261 samples were examined from 239 supplies and the result was as follows:—

	Sources of Supply.						Distri- bution.		Supp. to Schools		Total.	Percentage.
	Local Producers.	Outside Sources of Supply to Wholesale Dealers.	Outside Producers retailing in the Burgh.	Outside Producers supplying Retail Purveyors.	Graded Milk.	Outside Producers supplying for Pasteurisation.	Retail Purveyors.	Wholesale Dealers.	Producers supplying Wholesale Dealers.	Milk as supplied to Schools.		
Number of Supplies from which Samples were taken, - -	39	18	6	9	46	42	45	5	23	3	239	—
Number of Samples, - - -	39	18	6	9	46	42	48	5	23	25	261	—
Bacterial content of samples per cc.												
Not over 5,000, - - -	4	1	1	—	24	4	9	1	6	2	52	19.92
Over 5,000 not over 10,000, - -	6	4	—	1	6	10	6	2	3	1	39	14.94
" 10,000 " 30,000, - - -	8	9	2	3	5	13	19	2	6	2	69	26.43
" 30,000 " 100,000, - - -	9	4	2	4	5	9	7	—	2	2	44	16.85
" 100,000 " 200,000, - - -	3	—	1	—	2	5	6	—	1	2	20	7.66
" 200,000 " 500,000, - - -	6	—	—	—	1	1	—	—	1	6	15	5.70
" 500,000 " 1,000,000, - - -	1	—	—	—	3	—	—	—	—	1	5	1.91
" 1,000,000 " 2,000,000, - - -	2	—	—	1	—	—	1	—	4	9	17	6.51
" 2,000,000, - - -	—	—	—	—	—	—	—	—	—	—	—	—
B. Coli absent, - - -	27	10	5	7	44	28	33	4	17	14	189	72.41
B. Coli present in 1/10cc., - - -	12	8	1	2	2	14	15	1	6	11	72	27.58
B. Coli present in 1/100cc., - - -	6	2	—	1	—	6	6	1	3	10	35	13.40

It will be seen from the above that 85.8 per cent. of the samples were within the standard prescribed for Grade A milk as far as the number of bacteria is concerned.

Tuberculosis—

Ninety-six samples of milk were submitted to the biological test during the year. Of these, four gave a positive reaction. In 3 of the cases a cow suffering from tuberculosis of the udder was found at the producing farm outwith the burgh and appropriately dealt with, while in the fourth case the local farm had been discontinued in the interval between sampling and the receipt of the report, so that no further investigation was possible. This measure continues to be of the greatest value in the protection of the community from tuberculous disease.

Infectious Disease—

No cases of infectious disease spread by milk were encountered during the year although a continual watch was kept. No difficulty was experienced in dealing with such cases as occurred in premises where milk was handled, and it was not found necessary to stop the milk supply from any dairy or milk shop during the year.

It has been the custom for some time to remove from work for a period of 7 days any contact of scarlet fever who is working with milk, whether they have had the disease or not. In the case of diphtheria, the contact is kept off until a negative result has been received from swabbing of the throat.

Veterinary Inspection—

The Veterinary Inspector reports that the average number of cows in the burgh is 167, and the standard of cleanliness generally is very satisfactory. During the year 60 inspections were carried out at average intervals of approximately eight weeks, and 992 examinations of individual cows were made. Four cows were found on clinical examination to be suffering from mastitis, and one from an abscess of the udder. The use of the milk from these cows for human consumption was prohibited until the condition present had cleared up. One cow was found to be suffering from a chronic cough and showed definite clinical signs of tuberculosis: this was destroyed under the Tuberculosis Order. The milk from one cow with an abnormal udder was examined by the biological test with negative result. In no case was the tuberculin test applied under section 22 of the Milk and Dairies (Scotland) Act, 1914.

MEAT INSPECTION.

The work at the slaughterhouse continued to be satisfactory, and the arrangements for meat inspection during the year remained unaltered.

The following information which refers to the period 16th May, 1935, to 15th May, 1936, has been kindly supplied by Mr Peter McIntyre, M.R.C.V.S., Veterinary Inspector:—

CLASS.	Number Slaughtered.	Number affected with Tuberculosis.	Percentage affected with Tuberculosis.	Whole Carcases seized for Tuberculosis.	Parts of Carcases seized for Tuberculosis.	Whole Carcases seized for diseases other than Tuberculosis.	Parts of Carcases seized for diseases other than Tuberculosis.
Bullocks,	2,020	194	9.6	—	16	2	4
Bulls,	174	56	32.1	—	6	—	1
Cows,	911	494	54.2	33	69	11	18
Heifers,	1,291	176	13.6	3	18	33	8
Swine,	2,936	209	7.1	4	3	3	12
Sheep,	13,554	—	—	—	—	13	11
Calves,	1,392	5	0.35	3	—	8	1
Total	22,278	1,134	5.09	43	112	70	55

The following is the list of conditions which were responsible for the total or partial seizure of carcasses:—

Total Seizure:—Abscesses, 1; decomposition, 4; dropsy, 4; emaciation, 9; enteritis, 1; fevered flesh, 4; immaturity, 1; injuries, 34; peritonitis, 1; pneumonia, 2; pyrexia, 6; septic mastitis, 1; traumatic pericarditis, 1; tuberculosis, 43; umbilical pyaemia, 1.

Partial Seizure:—Abscesses, 1; adhesions, 8; arthritis, 3; enteritis, 2; injuries, 36; peritonitis, 4; pleurisy, 1; tuberculosis, 112.

The approximate weight of the meat and organs destroyed during the year was 31 tons.

HANDLING OF FOODSTUFFS.

The handling of food is now receiving much more attention than it used to do, and methods and equipment are slowly improving. There are many people, however, who probably do not give much thought to the hands and premises through which the food they eat passes to reach them. The greatest progress has probably been made in respect of milk

production and handling, which has undergone great changes in the last few years, since public opinion became alive to the situation. There are other articles of food, however, which, though not so easily and irrevocably damaged as milk, can still be contaminated by improper handling methods. To take one small example only, it may be said that the majority of sweetmeat shops have their products exposed in places where the dust from the streets, carrying all sorts of germs, can easily blow upon them, where persons with coughs and colds can and do sneeze and cough upon them, and where the inquisitive and ignorant can handle them unobserved with fingers of questionable cleanliness. The same holds of many bakers' shops, where cakes, etc., are likewise at the mercy of many unknown factors. Instances of this kind can be multiplied and the same remarks apply to almost any kind of shop where foodstuffs are sold.

It could be argued, of course, that where the exposed food must afterwards be cooked, no harm can result or that no illness can be proved to be due to such exposure. It certainly would be difficult to prove in many cases but there are numerous definite illnesses, the cause of which cannot be traced, and it may easily be that the infection is carried by material not properly protected in the shops from which it is bought. In any case, it is surely better to have a clean article to start with, rather than to buy it dirty and then vainly try to clean it.

In most instances the remedy is comparatively simple, and has already been adopted in some premises where thought has been given to the problem. Suitable glass or other transparent protective coverings should be used in all shops where foodstuffs are exposed for sale. No doubt all sorts of objections could be made against this procedure, but with goodwill, a little expenditure and a little determination, our food supply could be adequately protected and consequently improved while still on view to prospective purchasers. It is unlikely, however, that this will become the general rule until public opinion demands it.

HOUSING AND TOWN PLANNING.

HOUSING.—

The following information regarding houses certified for occupancy during the year has been kindly supplied by the Master of Works:—

Private Enterprise :—73 houses.

- 5 flats of 3 apartments.
- 9 semi-detached bungalows of 3 apartments.
- 14 semi-detached bungalows of 4 apartments.
- 5 bungalows of 4 apartments.
- 5 semi-detached bungalows of 5 apartments.
- 4 bungalows of 5 apartments.
- 4 bungalows of 6 apartments.
- 2 semi-detached villas of 4 apartments.
- 6 semi-detached villas of 5 apartments.
- 3 villas of 6 apartments.
- 5 semi-detached villas of 7 apartments.
- 2 villas of 8 apartments.
- 1 Presbytery of 11 apartments.

Dwellinghouses formed by dividing self contained villas, etc.—

- 1 house of 5 apartments.
- 3 houses of 6 apartments.
- 3 houses of 7 apartments.
- 1 house of 9 apartments.

Local Authority :—460 houses.

Bow Farm (Third Development).—

- 20 flatted houses of 2 apartments.
- 8 flatted houses of 3 apartments.
- 16 flatted houses of 4 apartments.
- 4 tenement houses of 3 apartments.
- 12 tenement houses of 4 apartments.

Huts and Auchendarroch Site.—

- 6 tenement houses of 2 apartments.
- 54 tenement houses of 3 apartments.
- 12 tenement houses of 4 apartments.
- 6 flatted houses of 3 apartments.

Maukinhill Farm Scheme.—

- 28 tenement houses of 2 apartments.
- 48 tenement houses of 3 apartments.
- 12 tenement houses of 4 apartments.
- 48 flatted houses of 2 apartments.
- 102 flatted houses of 3 apartments.
- 36 flatted houses of 4 apartments.

Gibbshill and Bogston, etc., Site.—

- 48 tenement houses of 3 apartments.

SLUM CLEARANCE.—

The number of houses inspected for the purposes of the Housing (Scotland) Acts, 1925 and 1930, during 1935 was 337.

During the period 1st January, 1930 to 31st December, 1935, the number inspected was 1,725. Of this total, 1,210 have been included in clearance areas as follows:—Central area, 630; John Street area, 464; Tobago Street (North) area, 70; Lower Vennel area, 23; Broad Close area, 23; while in 130 other action has been taken: thus, 1,340 houses have been actually dealt with during the six years. In addition to this, undertakings that the houses will not be used until rendered fit have been accepted by the Local Authority in 35 cases. This is a record of very considerable activity against the unfit house.

During 1935, 350 houses were closed, 451 families displaced and 1,827 persons rehoused, as follows:—

	Houses Closed.	Families Displaced.	Persons Rehoused.
Central Area, - -	242	326	1,310
John Street Area, -	73	87	337
Outwith Areas, - -	35	38	180
Total, - - - -	350	451	1,827

In the six years' period already referred to, the numbers dealt with were as follows:—

	Houses Closed.	Families Displaced.	Persons Rehoused.
Central Area, - -	668	832	3,558
John Street Area, -	73	87	337
Outwith Areas, - -	130	152	721
Total, - - - -	871	1,071	4,616

The number of houses closed in the Central Area namely, 668, does not correspond with the number 630 shown at the beginning of this section, as in the first instance lodgings, houses farmed-out houses, etc., were taken as one house, whereas here the apartments occupied by one family in a farmed-out house have had to be considered as one house. The houses in the John Street area were acquired by the Local Authority before the enquiry and were thus able to be closed.

Slum Clearance will in the future require to be prosecuted with unabated vigour, and the rehousing of tenants from unfit houses will be carried out in conjunction with decrowding operations.

As envisaged in last year's report, the method of compulsory purchase was chosen as the best means of dealing with the four areas represented in 1934. The enquiry was held in October, but the result was not published before the end of the year. The total number of houses involved was 580. The Tobago Street (North) area and the Lower Vennel area can be considered as parts of the Central area scheme, and redevelopment of all three areas will be considered and carried out as a whole. The John Street area, however, will require separate development, and considerable thought will be needed in the re-planning of the site, which is in some ways topographically not well suited for housing purposes. The Broad Close site will not, in all probability, be redeveloped for housing purposes.

SUB-LETTING.—

The preliminary survey required by the Housing (Scotland) Act, 1935 gave an opportunity of estimating with some degree of accuracy the extent to which sub-letting exists in the burgh, and this will be useful as a standard of comparison for future years.

The number of houses surveyed was 16,666, and of those 106 were at the time unoccupied. This latter number cannot be taken as a real index of the number of unoccupied houses, as it was largely due to the decanting operations in connection with rehousing being carried out at that time. In the 16,560 occupied houses, 18,302 separate families were found to be housed—an excess of 1,742 families over houses. It was found, however, that 1,534 houses had 2, 91 had 3, and 7 had 4 families giving a total of 1,632 sublet houses, housing 1,737 families. This latter figure is 5 less than the number shown above, but the

discrepancy is probably accounted for by cases of two families living in one apartment. These figures, therefore, indicate that approximately 9.8 per cent. of all the houses in the burgh under an annual rental of £45 are sublet.

This figure is considerably larger than previous estimates and represents a problem of some magnitude, but the new legislation, as indicated in last year's report, will now give the Local Authority a reasonable chance of reducing and controlling sub-letting.

OVERCROWDING.—

The Housing (Scotland) Act, 1935 was passed during the year, and at long last a legal standard of overcrowding was fixed. This is a great step forward, and will allow something definite to be done with the overcrowding problem. It is not going to be easy, and there will be many thorny questions to be answered before the solution is in sight. It is, however, a great achievement to have made a real start.

Towards the end of the year the preliminary survey of all houses not exceeding £45 per annum in rental in the burgh was undertaken, and although the result was not known until 1936, it will be convenient to include some information from it here. The survey has revealed some rather grim information, e.g., it is found that in 2 cases there are the equivalent of 9 adults and 1 child in a single apartment, and in 6 cases the equivalent of 8 adults and 1 child, while in one two apartment house there are sleeping 7 adult males, 4 adult females, and 1 female child under 10 years, and in another 6 adult males, 5 adult females and 1 female child. These are extreme cases, but there are numerous others of similar, though somewhat lesser, degree. No useful purpose can be served by multiplying such instances, but they are mentioned merely to show how terrible a thing overcrowding can be, and how impossible it would be for any other body but the Local Authority to deal with it satisfactorily.

The following figures are taken from Form (C) Overcrowding which was submitted to the Department of Health for Scotland.

Entry.	Houses.	Number of Apartments.						Total
		1	2	3	4	5	6 -	
1.	Surveyed, - -	1557	7535	5175	1579	567	253	15,666
2.	Overcrowded (c), -	576	3571	1257	176	20	17	5,617
	Percentage Overcrowded,	36.99	47.37	24.28	11.14	3.52	6.71	33.70
3.	Required to abate Overcrowding (c),	262	930	2572	1605	337	25	5,721
4.	Fit Existing Houses,							
	(1) Empty, -	7	73	12	5	3	6	106
	(2) To be rendered Vacant,	560	3005	843	75	—	—	4,483
	(3) Total, - -	567	3078	855	78	3	6	4,587
5.	Estimated surplus or New Houses required, - -	305	2148	—	—	—	—	2,453
		—	—	1717	1527	354	19	3,597
6.	Overcrowded houses belonging to Local Authority, - - (Included in Entry 2).	78	517	528	75	—	—	1,198

NOTE—(c)—An overcrowded house which is also unfit for human habitation is not included under entry (2) if it falls to be dealt with under the 1930 act. The accommodation required to rehouse the family to be displaced from such a house is not included under entry (3).

Another return (Form B) shows that if no distinction is made between fit and unfit houses 7,481 or 40.8 per cent. of the 18,302 families in the houses surveyed are living under overcrowded conditions.

It will thus be seen that if the problem were an entirely stationary one, and if all houses to be vacated in the course of

decrowding were available as reasonable alternative accommodation for other families, and if the requisite number of houses could be built at once, the provision of 3,597 houses would solve the problem at once except for slum houses, and there would remain 2,453 surplus houses of one and two apartments with no tenants to fill them. The problem, however, is not stationary and will never be so. The process of decrowding will have to go on for all time, but it will be comparatively simple to handle and control when the leeway has been made up, and this is represented theoretically by the figure of 3,597 houses for overcrowding alone. The immediate task of the Local Authority, therefore, is to get a considerable proportion of these houses built, and to take stock periodically as the process goes on, to ascertain what adjustments are necessary from time to time according to the change in number and state of the population. Towards this end the Local Authority has decided to build 1,000 houses for overcrowding during the next three years, which number appears to be about the maximum that the building trade can produce within the period. These have been apportioned as follows:—3 apartments, 500; 4 apartments 400; 5 apartments, 100.

The Local Authority has further decided, as laid down in the Act, to deal with the worst overcrowding first under the following general scheme:—

“Generally, the order in which cases of overcrowding will be dealt with will be determined by the size of house available at the time.

Subject to the foregoing consideration and the proviso in regard to illness aftermentioned, cases will be dealt with in order of the magnitude of difference, in relation to the size of house, between the number of persons reckoned as adults in occupancy and the number of persons who may be permitted to occupy the respective dwellinghouses. In cases of equity in number, preference will be given where there is necessity for sex separation. Priority will be given in cases of certain illnesses where the health of the patient is likely to be benefitted by, or where the risk of infection, as the case of tuberculous disease, will be lessened, through the movement of the occupiers to a larger house.

In all such cases the question of expediency will be a matter for determination by the Medical Officer of Health.”

It is not, of course, possible to devise a method which will please everybody, but the order of precedence laid down seems the fairest in all circumstances. The great drive towards decent housing conditions will soon be begun, and it has within it great possibilities for improvement in the health and happiness of a large number of individuals, and for the general benefit of the community as a whole.

TOWN PLANNING:—

No further progress has been made in this matter since the last report.

The question of town planning has become of very great importance in the country as a whole, and in the burgh it deserves the immediate attention of the Corporation. Houses are needed as rapidly as it is possible to build them, and a huge number of additional dwellings will require sites to be fixed for them at an early date. New streets and roads will be necessary, sites for schools, churches, other buildings, and open spaces will be needed, while the possibility of new industries, and the claims for extension of existing businesses cannot be ignored, especially as expansion in trade seems to be confidently expected. Town planning is a problem which cannot be satisfactorily dealt with unless adequate time and thought have been given to it, and it is thus of considerable importance that a town planning scheme should be agreed upon well before the time when new ground will have to be developed and old sites replanned and fitted in with their existing surroundings if the errors of the past, as represented by the haphazard conglomeration of buildings which constituted the Central Area, are not to be reproduced albeit on a wider and more open scale.

FACTORIES AND WORKSHOPS.

On the register kept by the Local Authority there were 228 workshops including factory bakehouses. Four hundred and fifty-eight visits of inspection were made by the Sanitary Inspector to factories and workshops and 75 to other workplaces. Intimations under the Public Health (Scotland) Act, 1897 were found necessary in 7 cases as follows:—

(1) Want of cleanliness,	-	-	-	-	-	2
(2) Unsuitable or defective sanitary conveniences,	-	-	-	-	-	3
(3) Other nuisances,	-	-	-	-	-	2

The terms of the intimation were complied with satisfactorily in all cases.

One list involving 92 out-workers (including 22 resident out-with the burgh) and 1 list involving 88 out-workers (including 20 resident outwith the burgh) were received in February and August respectively, while 15 intimations were transmitted to other local authorities in each of those months.

The work engaged in by these out-workers resident in the burgh included knitting, crocheting and sewing, and the condition of their homes was satisfactory in all cases.

WATER SUPPLY.

A full supply of water for domestic, trade and mill power purposes was maintained during the year. The minimum amount of water in store occurred on 14th September, when the supply in the various reservoirs was 109 days for all purposes.

The average consumpt of water per head, per day, is approximately 42 gallons.

Quarterly analyses of the water from the different sources were made by the Public Analyst, and these showed that it was in all respects suitable for domestic purposes.

DRAINAGE.

There was no trouble experienced during the year with flooding in the burgh, and the drainage system gave satisfactory service.

RIVERS POLLUTION.

No complaint was received during the year regarding pollution of streams within the burgh.

NUISANCES.

No medical certificates were issued in connection with nuisances as defined in section 16 of the Public Health (Scotland) Act, 1897.

METEOROLOGY.

The following information has been kindly supplied by Mr James McAlister, M.Inst.C.E., Engineer and Superintendent of Water Works, regarding the meteorological data relating to 1935. The readings were all taken at Prospectill filters, which are situated about two hundred feet above sea level.

MONTH.	Air Pressure. Mean Reading at Station Level and 32° C.	Air Temperature.		Rainfall in inches.	Number of days on which 0.01 or more fell.	Humidity per cent.
		Maximum.	Minimum.			
January,	30.240	45.5	36.8	3.25	17	87
February,	29.570	45.1	36.9	8.58	22	87
March,	30.133	48.7	39.6	2.12	16	83
April,	29.790	51.8	39.8	3.84	15	74
May,	30.232	59.3	42.8	0.57	6	67
June,	29.825	61.9	50.0	3.42	20	80
July,	30.072	66.1	52.8	2.29	12	74
August,	29.963	65.5	53.6	2.94	12	81
September,	29.731	59.8	48.8	8.78	24	82
October,	29.660	52.8	43.7	12.78	28	85
November	29.576	46.9	38.8	5.83	22	87
December	29.586	40.8	34.0	4.37	21	87

The total rainfall amounted to 58.77 inches, as compared with 60.90 inches in 1934, and 63.05 inches the mean of the 45 years 1890-1934.

PROPAGANDA.

The usual supply of leaflets on health matters was maintained for distribution at the Public Health Office. Posters giving information on venereal diseases were exhibited in all public conveniences.

Special posters on general public health subjects were displayed on the poster frames which were handed over to the department by the Empire Marketing Board.

The poster frame at the Battery Park was removed during the year, but another was substituted for it in the grounds at the Reception House, Sinclair Street.

As already mentioned, a publicity campaign was started in connection with the immunisation against diphtheria, and the method taken was to circularise all the parents by sending letters to the school children with a request that they be delivered at home. This gives promise of bearing fruit.

APPENDIX.

TABLE I.—VITAL STATISTICS.

(A) BIRTHS, DEATHS AND MARRIAGES.

	Numbers Registered in District.	Transfers.		Corrected Number.		
		Out.	In.	Both Sexes.	Males.	Females.
Total Births (including Illegitimate). - -	1,689	20	24	1,693	860	833
Illegitimate Births. -	78	2	12	88	44	44
Marriages. - - -	583	...	...	...	...	...
Deaths. - - -	1,114	65	59	1,108	607	501

(B) DEATHS AND DEATH-RATES IN AGE GROUPS.

Ages.	Population Estimated at Mid-Year by M.O.H.	Number of Deaths.	Percentage of Total Deaths.	Death-rate per 1000 of the Population.	Average Death-rate per 1000 of population during preceding 5 years.
Under 1 Year. - -	1,780	156	14.08	87.64	90.31
From 1—5 Years. -	6,304	54	4.87	8.56	14.10
.. 5—10 .. -	8,289	19	1.71	2.29	3.50
.. 10—15 .. -	8,074	16	1.44	1.98	2.01
.. 15—25 .. -	14,262	52	4.69	3.64	3.69
.. 25—35 .. -	11,724	48	4.33	4.09	4.59
.. 35—45 .. -	9,925	90	8.12	9.06	6.97
.. 45—55 .. -	8,707	97	8.75	11.14	11.97
.. 55—65 .. -	6,282	138	12.45	21.96	26.75
.. 65—75 .. -	3,401	234	21.12	68.80	66.72
.. 75—85 .. -	1,086	161	14.53	148.25	139.84
.. 85 and over. -	146	43	3.88	294.52	266.42
TOTAL. -	79,980	1,108	100.00	13.85	13.95

TABLE II.—CAUSES OF DEATH (corrected for Transfers)—REGISTRAR GENERAL.—1935.

CAUSES OF DEATH.	ALL AGES.			AGE.										
	Both Sexes.	Males.	Females.	1—	5—	10—	15—	25—	35—	45—	55—	65—	75—	85 and over.
Typhoid Fever (including Paratyphoid),	1	1	..	..	..	..	..	1	..	..	..	..	..	..
Menses.	3	2	1	3	..	..	..	..	..	..	..	..	..	..
Scarlet Fever,	2	1	1	1	1	..	..	..	..	..	..	..	..	..
Whooping Cough,	26	12	14	12	..	..	..	..	..	..	..	..	..	..
Diphtheria.	6	4	2	5	1	..	..	..	3	1	7	5	1	2
Influenza,	23	12	11	2	..	..	2	..	..	..	..	..	..	..
Cerebro-Spinal Fever.	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Other Epidemic Diseases,	2	2	..	..	..	..	..	..	..	..	..	..	..	..
Tuberculosis of Respiratory System,	61	33	28	1	..	5	19	12	15	6	4	1	..	1
Other Tuberculous Diseases,	7	5	2	2	1	1	1	..	1	..	..	..	..	..
Other Infectious and Parasitic Diseases,	4	4	..	..	..	..	..	..	..	..	..	..	..	..
Cancer, Malignant Disease,	136	69	67	1	..	..	1	4	7	16	31	45	28	5
Diabetes Mellitus,	14	6	8	..	..	..	..	..	..	2	2	8	1	..
Other General Diseases, Chronic Poisonings,	23	11	12	1	1	1	1	3	4	4	2	6	1	..
Cerebral Haemorrhage, etc.,	88	47	41	1	..	..	1	..	4	5	14	36	21	6
Other Dis. of Nervous System & Sense Organs,	46	27	19	11	4	3	3	4	3	7	4	2	1	..
Heart Disease,	169	81	88	..	1	..	3	5	15	20	34	51	35	5
Other Circulatory Diseases,	27	20	7	..	..	2	1	..	6	4	3	10	9	4
Bronchitis,	55	33	22	5	..	1	6	7	9	12	8	12	12	4
Pneumonia (all forms),	80	53	27	22	12	1	1	..	3	1	4	4	1	..
Other Respiratory Diseases,	10	1	9	..	..	..	..	..	2	1	2	2	1	1
Gastric and Duodenal Ulcer,	11	9	2	..	..	..	..	..	..	..	..	..	..	..
Diarrhoea, etc. (all ages),	26	11	15	13	6	1	..	..	1	1	2	2	1	..
Appendicitis,	4	4	..	..	2	..	..	..	1	1	2	1	..	1
Cirrhosis of Liver,	3	2	1	..	..	..	1	..	..	..	2	1	..	..
Other Diseases of Liver, etc.,	5	..	5	..	..	..	..	..	..	..	5	3	..	..
Other Digestive Diseases,	22	9	13	2	1	..	..	2	5	1	3	4	2	1
Acute and Chronic Nephritis,	17	9	8	..	..	..	1	3	1	1	2	6	2	..
Other Diseases of Genito-Urinary System,	19	12	7	..	..	..	..	1	2	2	2	10	1	..
Puerperal Sepsis,	3	..	3	..	..	..	3	2	3	..	..	..	..	..
Other Puerperal Causes,	8	..	8	..	..	..	..	..	..	..	..	..	..	..
Diseases of Skin and of Locomotor System,	12	7	5	4	2	1	..	..	..	2	1	1	2	..
Congen. Deb., Prem. Birth, Malformations, etc.	79	49	30	79	..	..	..	1	1	1	..	4	33	11
Old Age,	48	20	28	..	..	..	..	3	3	3	5	5	4	..
Suicide,	4	3	1	2	4	1	7	3	1	6	10	3	1	..
Other Violence,	40	31	9	1	..	1	1	..	..	..	..	..	..	..
Causes ill-defined or Unknown,	24	17	7	1	..	..	..	..	..	..	..	..	..	1
ALL CAUSES.	1,108	697	501	156	54	19	16	48	90	97	138	234	161	48

CAUSES OF DEATH.	District.												Total.	Death-rate per 1000 of Population.	
	A.			B.			C.			D.					
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.			
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.			
Typhoid Fever (including Paratyphoid),	-	-	1	-	-	-	1	1	1	1	-	-	1	1	0.0125
Measles,	1	-	2	-	-	-	1	1	2	-	-	-	2	3	0.0375
Scarlet Fever,	1	1	2	-	-	-	-	-	-	-	1	1	1	2	0.0250
Whooping Cough,	6	3	9	-	3	4	5	7	12	-	1	14	26	6	0.3250
Diphtheria,	1	1	2	1	1	1	-	1	1	2	-	2	4	2	0.0750
Influenza,	3	4	7	3	1	4	2	3	5	4	3	7	11	23	0.2875
Cerebro-Spinal Fever,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other Epidemic Diseases,	1	-	1	-	-	-	-	-	-	1	2	-	-	2	0.0250
Tuberculosis of Respiratory System,	12	13	25	11	3	14	9	10	19	1	33	23	61	7	0.7626
Other Tuberculous Diseases,	3	2	5	1	-	1	1	-	-	1	2	1	5	2	0.0875
Other Infectious and Parasitic Diseases,	2	2	2	1	-	1	-	-	-	-	4	-	4	-	0.0500
Cancer, Malignant Disease,	25	25	50	11	10	21	12	15	27	21	17	38	69	136	1.7004
Diabetes Mellitus,	2	3	5	2	2	4	1	2	3	4	6	8	14	14	0.1750
Other General Diseases, Chronic Poisonings,	5	7	12	-	-	-	21	11	32	13	19	32	50	43	0.3125
Cerebral Haemorrhage, etc.,	11	9	20	5	4	9	8	7	15	5	27	19	46	93	1.1627
Other Dis. of Nervous System & Sense Organs,	11	7	18	3	3	6	20	24	44	19	20	39	84	168	0.5751
Heart Disease,	32	24	56	13	16	29	25	20	44	19	20	39	84	168	2.1005
Other Circulatory Diseases,	5	-	5	3	2	5	5	2	7	4	3	7	17	24	0.3004
Bronchitis,	12	9	21	8	5	13	10	4	14	3	7	33	22	55	0.6876
Pneumonia (all forms),	17	15	32	8	2	10	24	10	34	4	4	53	27	80	1.0002
Other Respiratory Diseases,	1	2	3	-	3	3	2	2	2	2	2	9	10	10	0.1250
Gastric and Duodenal Ulcer,	5	1	6	-	1	1	2	2	2	2	2	9	2	11	0.1375
Diarrhoea, etc. (all ages),	6	5	11	1	3	4	4	7	11	1	-	15	26	4	0.3250
Appendicitis,	1	-	1	1	-	1	2	-	2	-	1	4	4	2	0.0500
Cirrhosis of Liver,	-	1	1	-	-	-	1	-	1	2	2	1	3	3	0.0375
Other Diseases of Liver, etc.,	-	-	-	-	-	-	-	1	1	-	2	3	3	3	0.0375
Other Digestive Diseases,	3	2	5	1	1	2	3	4	7	2	6	13	22	22	0.2750
Acute and Chronic Nephritis,	3	3	6	1	3	4	2	1	3	3	3	9	8	17	0.2125
Other Diseases of Genito-Urinary System,	2	2	4	1	1	2	1	2	3	8	2	10	12	7	0.2375
Puerperal Sepsis,	-	-	2	-	-	-	-	-	1	1	-	-	3	3	0.0375
Other Puerperal Causes,	-	3	3	-	2	-	-	3	3	-	-	8	8	6	0.1000
Diseases of Skin and of Locomotor System,	2	4	6	1	-	1	2	1	3	2	7	5	12	12	0.1500
Congen. Deb., Prem. Birth, Malformations, etc.	18	15	33	6	7	13	22	6	28	3	2	30	79	30	0.9877
Old Age,	2	9	11	4	6	10	6	7	13	8	16	20	50	50	0.6251
Suicide,	-	-	-	3	3	3	-	-	-	-	1	1	3	4	0.0500
Other Violence,	-	4	20	1	1	2	10	3	13	4	1	5	9	40	0.5001
Causes Ill-defined or Unknown,	5	1	6	2	-	2	7	-	7	1	5	6	21	21	0.2625
ALL CAUSES,	214	177	391	93	79	172	182	139	321	118	106	224	501	1103	13.8520

TABLE IV.—POPULATION AND PRINCIPAL RATES
PER 1,000—REGISTRAR GENERAL—1881-1935.

Year.	Population.	Death-rate.	Birth-rate.	Infantile Mortality Rate.	Tuberculosis Death-rate.	
					Pulmonary.	Non- Pulmonary.
1881-1885	71,578	22.19	38.01	139	2.35	0.96
1885-1890	72,073	18.92	32.23	127	2.03	0.69
1891	63,432	22.54	32.55	163	1.82	0.56
1892	63,027	19.74	35.83	116	2.01	0.65
1893	62,713	20.90	32.96	134	1.59	0.65
1894	62,400	19.23	32.20	133	2.09	0.49
1895	62,090	23.06	33.84	152	1.62	0.82
1891-1895	62,732	21.09	33.47	139	1.82	0.63
1896	61,781	17.84	33.08	120	1.76	0.51
1897	61,475	22.17	33.05	159	2.06	0.68
1898	61,170	21.38	35.20	136	2.07	0.83
1899	67,269	19.64	31.01	142	1.70	0.83
1900	67,776	19.18	32.50	130	1.59	0.84
1896-1900	63,894	20.04	32.96	137	1.83	0.74
1901	68,264	19.45	29.84	132	1.46	0.90
1902	68,756	19.85	31.74	122	1.81	0.94
1903	69,252	18.93	29.56	144	1.68	0.80
1904	69,749	17.65	30.09	123	1.20	0.93
1905	70,253	18.78	30.49	116	1.31	1.05
1901-1905	69,254	18.93	30.34	127	1.49	0.92
1906	70,758	17.89	32.21	127	1.34	1.25
1907	71,269	17.79	30.25	104	1.54	1.08
1908	71,783	17.00	30.31	118	1.21	1.12
1909	73,214	15.01	26.73	95	1.09	1.09
1910	74,667	18.87	28.85	129	1.16	0.96
1906-1910	72,338	17.31	29.67	114	1.26	1.10
1911	75,028	18.44	30.73	113	1.50	0.95
1912	76,337	18.70	31.30	119	1.44	1.02
1913	77,156	18.22	31.03	116	1.47	0.86
1914	77,642	18.04	32.84	108	1.00	0.91
1915	77,695	20.14	29.49	145	1.15	0.91
1911-1915	76,771	18.70	31.07	120	1.39	0.93
1916	78,642	17.10	29.20	109	1.42	0.75
1917	79,299	15.10	26.88	92	1.28	0.83
1918	79,574	17.88	26.52	110	1.10	0.82
1919	79,613	17.25	28.73	99	0.94	0.59
1920	80,436	16.51	33.34	104	1.06	0.69
1916-1920	79,512	16.76	28.93	102	1.16	0.73
1921	81,120	14.59	30.15	93	1.01	0.54
1922	81,370	19.17	27.68	149	1.03	0.68
1923	81,522	12.94	27.04	77	0.99	0.54
1924	82,096	15.22	24.16	113	1.00	0.44
1925	81,200	14.32	24.54	107	0.85	0.52
1921-1925	81,461	15.24	26.71	107	0.97	0.54
1926	81,558	13.74	23.87	90	0.98	0.34
1927	80,889	13.26	22.17	89	0.87	0.44
1928	79,204	15.74	24.05	120	0.80	0.34
1929	81,844	15.57	22.22	111	1.04	0.26
1930	82,131	13.69	22.98	96	0.88	0.30
1926-1930	81,125	14.40	23.05	101	0.91	0.33
1931	79,012	13.50	23.40	78	0.90	0.30
1932	79,387	14.63	21.47	121	0.66	0.36
1933	79,486	15.03	20.60	108	0.88	0.18
1934	79,605	12.90	20.86	89	0.79	0.21
1935	79,980	13.85	21.16	92	0.76	0.09
1931-1935	79,494	13.98	21.49	97	0.79	0.22

TABLE V.—SOURCES OF NOTIFICATIONS OF INFECTIOUS DISEASES—1935.

DISEASE.	By Whom Reported.						Total.
	House-holders.	House-holders & Doctors.	Doctors.	Public Health Officers.	School Medical Officers.	Registrars.	
Pneumonia.	...	...	35	...	...	20	55
Enteric Fever.	...	...	1	...	...	...	7
Diphtheria.	...	18	104	...	...	...	122
Scarlet Fever.	...	20	74	...	...	...	94
Puerperal Fever.	...	...	1	...	...	...	1
Puerperal Pyrexia.	...	...	12	...	...	...	12
Erysipelas.	...	10	49	...	...	...	59
Encephalitis Lethargica.	...	...	1	...	...	...	1
Cerebro-Spinal Fever.	...	...	1	...	...	...	1
Measles.	1,037	...	11	6	19	...	1,073
Chickenpox.	618	...	...	...	6	...	624
Whooping Cough.	1,038	2	11	1	18	...	1,070
Ophthalmia Neonatorum.	...	...	...	...	...	...	26
TOTAL.	2,693	50	306	7	43	20	3,145

TABLE VI.—MONTHLY INCIDENCE OF INFECTIOUS DISEASES—1935.

MONTH.	Diphtheria	Erysipelas.	Scarlet Fever.	Enteric Fever.	Puerperal Fever.	Puerperal Pyrexia.	Encephalitis Lethargica.	Cerebro-Spinal Fever.	Pneumonia.	Chickentpox.	Measles.	Whooping Cough.	Ophthalmia Neonatorum.	Total.
January, ...	11	4	17	...	...	1	...	...	5	23	346	139	3	549
February, ...	21	5	10	...	...	1	1	...	5	25	311	200	2	581
March, ...	13	...	6	...	...	...	...	1	7	26	292	336	3	684
April, ...	6	7	7	...	...	1	...	...	8	33	82	222	...	366
May, ...	12	5	9	...	...	...	...	...	8	59	27	110	4	234
June, ...	16	5	7	...	...	1	...	...	4	109	7	35	...	184
July, ...	4	2	2	3	...	...	...	...	3	35	1	11	1	62
August, ...	6	4	5	1	...	...	...	...	2	39	...	11	2	70
September, ...	7	5	13	...	1	2	...	...	3	67	1	6	3	108
October, ...	11	5	9	...	1	5	...	...	3	67	1	...	1	102
November, ...	7	10	4	...	...	1	...	...	...	79	2	...	3	108
December, ...	8	7	5	1	...	...	...	...	7	62	3	...	4	97
TOTAL,	122	59	94	7	1	12	1	1	55	624	1,073	1,070	26	3,145

TABLE VII—DISTRICT INCIDENCE OF INFECTIOUS DISEASES WITH NUMBER OF REMOVALS TO HOSPITAL—1935.

DISTRICT.	CASES.	Pneumonia.	Enteric Fever	Diphtheria.	Scarlet Fever.	Puerperal Fever.	Puerperal Pyrexia.	Erysipelas.	Cerebro-Spinal Fever.	Encephalitis Lethargica.	Measles.	Chickenpox.	Whooping Cough.	Ophthalmia Neonatorum.	Total.
A.	{ Ascertained, Removed,	22	1	36	35	...	6	22	1	1	373	347	565	21	1,430
B.	{ Ascertained, Removed,	2	1	35	35	...	4	16	1	...	3	1	5	..	103
C.	{ Ascertained, Removed,	9	1	22	14	...	2	11	...	..	125	76	118	1	379
D.	{ Ascertained, Removed,	1	1	22	14	...	1	3	...	..	3	...	...	...	45
	{ Ascertained, Removed,	20	3	52	21	1	2	19	...	...	451	157	304	3	1,033
	{ Ascertained, Removed,	..	3	50	21	1	1	2	...	...	5	4	6	...	93
	{ Ascertained, Removed,	4	2	12	24	..	2	7	...	...	124	44	83	1	303
SHIPS	{ Ascertained, Removed,	...	2	12	20	...	...	...	...	...	...	...	2	...	36
	{ Ascertained, Removed,	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	{ Ascertained, Removed,	...	...	...	...	...	...	...	...	...	...	...	...	...	...
TOTAL.	{ Ascertained, Removed,	55	7	122	94	1	12	59	1	1	1,073	624	1,070	26	3,145
	{ Ascertained, Removed,	3	7	119	90	1	6	21	1	..	11	5	13	...	277

DOUBLE DISEASES.

- 1 case had diphtheria and measles.
- 1 case had scarlet fever and whooping cough
- 14 cases had measles and whooping cough.
- 4 cases had chickenpox and whooping cough.
- 1 case had puerperal pyrexia and acute primary pneumonia.

(Each of these diseases has been entered as a separate case in the above Table).

TABLE VIII.—INFECTIOUS DISEASES RATES 1900-1935.

YEAR.	SCARLET FEVER.			DIPHTHERIA.			MEASLES.			WHOOPING COUGH.		
	Incidence rate per 1000.	Death-rate per 1000.	Case mortality rate per cent.	Incidence rate per 1000.	Death-rate per 1000.	Case mortality rate per cent.	Incidence rate per 1000.	Death-rate per 1000.	Case mortality rate per cent.	Incidence rate per 1,000.	Death rate per 1,000.	Case mortality rate per cent.
1900	2.55	0.17	6.93	1.19	0.41	34.56	5.48	0.13	2.41	9.42	1.69	11.58
1901	7.92	0.42	5.36	8.93	0.17	19.67	10.82	0.35	3.24	1.87	0.36	19.53
1902	7.79	0.85	11.00	1.06	0.43	41.09	26.44	0.49	1.87	1.26	0.13	10.34
1903	2.33	0.11	4.93	0.54	0.12	23.68	0.66	0.02	4.34	6.55	1.02	15.63
1904	1.07	0.07	6.66	1.17	0.27	23.17	30.28	0.83	2.74	3.59	0.32	9.16
1905	2.81	0.32	11.61	0.83	0.21	24.19	31.31	0.82	2.63	5.50	0.76	13.95
1906	1.92	0.08	4.41	0.70	0.12	18.00	4.04	0.12	3.14	2.54	0.28	11.11
1907	2.16	0.05	2.59	0.75	0.14	18.51	19.68	0.46	2.35	3.70	0.68	18.56
1908	0.97	0.01	1.42	0.72	0.16	23.07	14.76	0.58	3.96	3.63	0.47	13.02
1909	2.89	0.04	1.41	1.05	0.13	12.93	1.73	0.02	1.57	4.73	0.65	13.83
1910	5.02	0.14	2.93	1.27	0.18	14.73	38.45	1.21	3.16	3.87	0.45	11.76
1911	5.18	0.18	3.59	1.94	0.09	9.85	1.45	0.17	3.89	3.85	0.42	7.28
1912	10.02	0.49	4.96	1.21	0.13	10.75	19.93	0.66	3.35	4.12	0.36	8.88
1913	5.59	0.24	4.39	1.05	0.18	17.50	19.95	0.41	2.07	9.40	0.63	6.74
1914	2.65	0.05	1.94	1.76	0.12	7.29	11.86	0.33	4.82	4.22	0.33	7.92
1915	1.90	0.11	6.08	1.72	0.16	9.70	14.32	0.65	4.58	9.38	0.73	7.81
1916	3.73	0.76	2.04	1.61	0.19	11.81	17.16	0.95	5.55	0.72	0.05	7.01
1917	2.74	0.06	2.29	1.23	0.12	10.20	10.12	0.20	1.99	11.43	0.80	7.05
1918	1.36	0.01	0.91	0.70	0.03	5.35	15.26	1.25	12.33	4.53	0.33	7.47
1919	3.95	0.06	1.58	1.10	0.03	3.10	15.26	0.32	2.13	2.36	0.16	6.91
1920	1.47	0.04	3.36	1.28	0.07	5.82	5.71	0.21	4.34	6.88	0.27	3.97
1921	1.31	0.01	0.93	1.76	0.07	4.19	3.69	0.00	0.00	0.62	0.00	0.00
1922	1.56	0.01	0.90	1.04	0.08	8.23	36.32	2.17	5.98	18.31	0.98	5.36
1923	4.90	0.07	1.50	1.37	0.07	5.35	6.31	0.14	2.33	0.41	0.02	5.88
1924	2.64	0.06	2.20	1.79	0.06	3.40	23.02	0.59	2.59	15.87	0.54	3.45
1925	1.21	0.01	1.01	2.11	0.09	4.65	1.07	0.00	0.00	6.83	0.39	5.76
1926	3.95	0.00	0.00	3.33	0.13	4.01	24.57	0.16	1.89	0.71	0.01	1.72
1927	3.18	0.06	1.77	3.20	0.03	1.15	7.76	1.02	0.31	5.24	0.09	1.88
1928	0.84	0.01	1.49	2.91	0.17	6.06	29.49	1.02	3.46	8.53	0.51	6.06
1929	2.02	0.00	0.00	2.41	0.07	3.03	0.52	0.02	4.61	6.25	0.46	7.44
1930	3.61	0.08	2.35	1.57	0.06	3.87	25.09	0.34	1.35	6.24	0.18	2.92
1931	3.69	0.07	2.05	1.06	0.03	3.57	1.48	0.00	0.00	3.97	0.11	2.86
1932	10.69	0.12	1.17	1.41	0.05	3.47	38.01	0.90	2.58	3.30	0.06	1.90